

Annual Report

of the

ARIZONA STATE HOSPITAL



Fiscal Year July 1, 1953 to June 30, 1954







**The new Intensive Treatment Building, housing Occupational Therapy and other modern treatment facilities.**



## Arizona State Hospital Board

<i>Sherman Hazeltine</i>	<i>Chairman</i>
<i>Dilworth C. Brinton</i>	<i>Vice Chairman</i>
<i>John C. Underwood, Jr.</i>	<i>Member</i>
<i>Malin W. Lewis</i>	<i>Member</i>
<i>John P. Sands</i>	<i>Member</i>

## Administrative Officers

*Samuel Wick, Superintendent*  
*R. A. Clelland, Business Manager*



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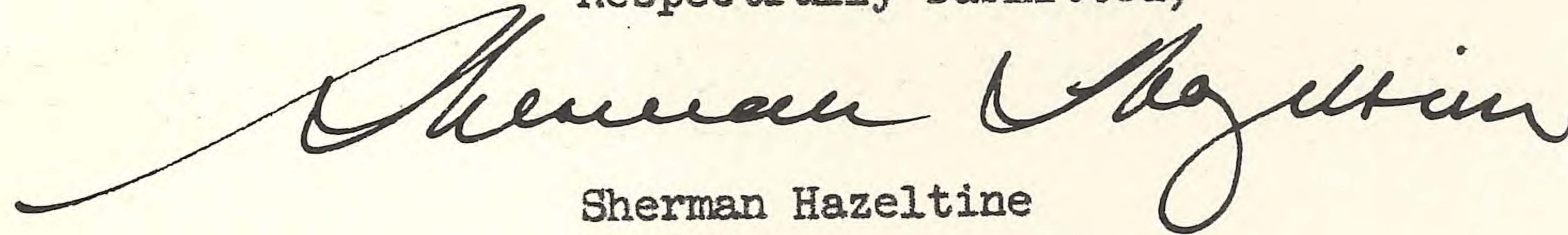
Honorable Howard Pyle  
Governor, The State of Arizona  
The State Capitol  
Phoenix, Arizona

Dear Governor Pyle:

I am proud to submit to you herewith, the report on the affairs of the Arizona State Hospital for the fiscal year ending June 30, 1954. Many of the objectives expressed in our last annual report have now become realities, and while we have no illusions of perfection, the Board of Control and the staff of the Hospital know that demonstrable progress has been made.

Should there be question concerning any of the items enumerated in the report, or in the objectives expressed for the coming year, I welcome your inquiry.

Respectfully submitted,

A handwritten signature in cursive script, reading "Sherman Hazeltine". The signature is written in dark ink and is positioned above the printed name and title.

Sherman Hazeltine  
Chairman  
Arizona State Hospital Board





Left to Right:  
Samuel Wick, M.D., Hospital Director  
John C. Underwood, Jr., Member  
Malin W. Lewis, Member  
Sherman Hazeltine, Chairman  
John P. Sands, Member  
Dilworth C. Brinton, Vice Chairman  
R. A. Clelland, Secretary to the Board

### Board Members & Administrative Officers





Paintings and intricate handwork, all created by patients, are demonstrated at the Arizona State Fair of 1953.

## Patients Display Their Work . . .

At the 1954 State Fair the public will be treated to a puppet show demonstrating the progress of a patient through the Hospital and explaining how a hospital for mental illness operates.





# Arizona State Hospital

## Annual Report of the Superintendent

July 1, 1953 to June 30, 1954

### *Medical, Nursing and Therapeutic Staff*

#### **MEDICAL**

D. M. Bramwell, M.D., Chief, Psychiatric Services  
Mary J. Weber, M.D., Staff Psychiatrist  
Peter J. Doyle, M.D., Staff Psychiatrist  
D. H. Bruns, M.D., Staff Psychiatrist  
Carl Breitner, M.D., Staff Psychiatrist  
William Zack, M.D., Staff Physician  
Robert L. Henry, D.D.S.  
Willard Rogers, Psychologist  
Elias Schlossberg, Pharmacist

#### **NURSING**

Mary E. Andersen, R.N., Director of Nursing  
Miriam Sholley, R.N., Director Nursing Education

#### **THERAPEUTIC**

Occupational Therapy Department  
Marjorie Evert, O.T.R., Director  
Recreational Therapy Department  
William J. Hersey, Director

#### **CONSULTING STAFF**

John R. Green, M.D.  
Harry F. Steelman, M.D.  
Laurel A. Stapley, M.D.  
L. L. Tuveson, M.D.  
Harry J. French, M.D.  
Marcy L. Sussman, M.D.  
Henry A. Siegal, M.D.  
D. P. Haislip, M.D.  
Bertram L. Snyder, M.D.  
Miss Alice Richards  
John L. Ford, M.D.  
Wallace A. Reed, M.D.  
Dr. Julius Citron  
Dr. Samuel Mason  
Dr. H. B. Seyfert  
Dr. A. J. Stern

Neuro-Surgery  
Neuropathology  
Clinical Pathology  
Orthopedic Surgery  
Ophthalmology  
Radiology  
Gynecology  
Cardiology  
Tuberculosis  
Anesthesiology  
Anesthesiology  
Anesthesiology  
Chiropody  
Chiropody  
Chiropody  
Chiropody



## Hospital Superintendent's Report

Members of the Hospital Board of Control

Sherman Hazeltine, Chairman.

It is with a feeling of accomplishment during the past year, and with anticipation for the coming year that I present the Annual Report for the fiscal year ending June 30, 1954.

Many noteworthy advances have been made during the year which reflect the interest, effort, and thought of many people. These people include the members of the Hospital Board, the Medical Staff, the ancillary staff, the Business Manager with his staff, the Nursing Service with the large part contributed by the Psychiatric Aides, all other employees of the hospital, the volunteer group of Gray Ladies, and many interested groups in the community. Without the assistance and cooperation of all these people it would be impossible to maintain and improve the status of the hospital.

### NEW BUILDINGS:

For the past two years construction has proceeded on three new buildings for patients, a new storeroom and a maintenance building, all of which were completed during 1954. The new buildings have relieved the marked overcrowding and permitted better classification of patients in the other wards. The new storeroom has sufficient area to receive and issue all the supplies and clothing used on the wards and by the patients. The new maintenance building with its new equipment will provide better service in the upkeep and repairs necessary in the hospital.

Although these completed buildings have reduced the overcrowding, the gradual growth of the patient population indicates that the present bed capacity of the hospital will again be inadequate. The present rated bed capacity of the hospital with the new buildings is 1500, and the present patient population is 1700, but with an annual increase of approximately 80 patients there will be 2100 patients in five years. Now is the time to begin planning so that a larger hospital will not be necessary. The establishment of psychiatric units in the County Hospitals to give out-patient care will aid in the prevention of the development of serious mental illness. These psychiatric units would also give immediate treatment

to acute conditions so that commitment to the State Hospital would be prevented. The development of special psychiatric units is the general trend throughout the country.

The members of the Legislature, the Judges, and the Medical Profession were invited to tour the new buildings at an "Open House" held on the evening of March 18, 1954 at which time Governor Howard Pyle spoke of the progress at the hospital and its future needs. On March 21, 1954 the new buildings were opened to the general public for their inspection. In order to obtain better understanding and cooperation from the community it is necessary that the public be aware of the problems of the hospital and the changes which had taken place.

The Geriatric Building with its designated patient population of 400 is housing more patients than the planned number. This is due to the large number of admissions of older patients which will continue to be an increasing problem. This problem is national in scope and reflects the increase in the general population of a larger number of people who have reached the age of 65. A possible solution would be to maintain these elderly people in rest homes where they would receive supervision and care, where they would have a more homelike atmosphere, and where the cost of maintenance would be less than in the hospital. This would release beds for the care of the more acute psychiatric conditions which require the treatment facilities available at the hospital.

The Tuberculosis Hospital has fifty patients who occupy the first floor. As yet the upper floor has not been activated because of the lack of necessary personnel due to an insufficient appropriation. The beds on the second floor could be utilized for convalescent and arrested cases of tuberculosis where they could be checked more closely before being returned to other wards. During the past year the mobile X-ray unit from the State Health Department surveyed the entire hospital population, and from the results of this survey a number of new cases of tuberculosis were diagnosed.

The Intensive Treatment Building is being utilized for those patients who can benefit from the activity and environment so that the period of hospitalization can be reduced. The purpose of that building is to concentrate all forms of treatment which would give



the patient the best opportunity for rapid improvement. The cheerful surroundings, the bright decorations, and the hopeful atmosphere found in this building have been useful adjuncts to other forms of therapy.

The new Occupational Therapy shops with the required space and new equipment have aided greatly in the treatment of the patients. The previous quarters were makeshift and inadequate to provide the necessary treatment facilities. The new Director of Occupational Therapy has provided the department with new enthusiasm, increased activity and ideas for future plans. The increase in the number of patients treated and the number of treatments is shown in her report.

With the opening of the new buildings it has been possible to relieve the overcrowding in other wards. An attempt is being made to segregate similar types of patients according to their behavior in order to provide the environment and activities which will be most beneficial to them. Within a short period of time I expect that all double decker beds will be eliminated, and there will be an increase in the area allotted for day-rooms which will help in the general care and management of patients in all wards.

In accordance with the recommendations of the Hospital Board, Ward E—an old frame building which had been used for an open ward for women and which was considered to be dangerous as a fire trap—has been evacuated of all patients and condemned for further use. These patients were moved to quarters in the Geriatrics Building which reduced the number of available beds for geriatric patients. One other building on the grounds, Cottage 4, should be condemned as unsafe and as a fire trap. This building is similar in construction and age to Ward E. At the present time it houses the offices for the Director of Nursing, the Nursing Supervisors and a number of employees who are living on the grounds.

Plans are being completed for the transfer of the remaining 45 children to the Children's Colony. According to instructions from the Children's Colony, this should be completed during the month of October, 1954. This will allow Ward D-1, where the children are presently located, to be remodeled into an admissions unit which will include the offices for the Director of Nursing, and the Nursing Supervisors.

## BUILDING NEEDS:

Following are the needs for new buildings during the coming year:

1. Two additional wards for the Geriatric Building. This will supply needs for the increase in the geriatric population in the hospital. The geriatric building was designed so that these two wards could be added when funds became available.
2. Remodeling of the "B" Building. This building at the present time contains the chronically disturbed and regressed female patients. The quarters are inadequate, the treatment facilities are insufficient, and the arrangement of the building precludes the possibility of utilizing modern treatment methods for this type of patient.
3. Three new cottages for the medical staff. In order to improve and maintain the level of treatment necessary to produce the best results, the medical staff must be increased to provide that service. These cottages would supply living quarters for the increased staff members.
4. An apartment building for those employees living on the grounds. Most of the employees at the present time live in cottage 4 which is considered unsafe and should be condemned.
5. An additional boiler for increased steam generation capacity.

## A. P. A. APPROVAL:

In the month of April the hospital was inspected by the Chairman of the Central Insection Board from the American Psychiatric Association. As yet the report of this inspection is not available, but the comments of the inspector were quite favorable regarding the number of changes and the improvements that had been made at the hospital. In order to meet the standards of Approval it will be necessary to increase the quota for personnel in all departments, and to make improvements in the existing buildings. The report should indicate in which areas the hospital is still deficient. Considerable



credit is due the Hospital Board of Control for their diligence and insistence that the hospital improve to meet the standards set by the American Psychiatric Association.

#### NURSING SERVICE:

In December, 1953, Mrs. Jean Dickson resigned as Director of Nursing, and Mrs. Mary Andersen was appointed to replace her. Mrs. Andersen had previously been Director of Nursing Education and was aware of the many problems which existed in the nursing service.

Miss Miriam Sholley was appointed as Director of Nursing Education.

During this past year both the male and female services were placed under the direct supervision of the Director of Nursing. Previously the male Supervisor had charge of the male service without any responsibility to the Director of Nursing. Since the supervision has been consolidated, all parts of the hospital follow the same procedures and policies in regard to the care and treatment of patients. In the beginning there was resistance noticed among some of the male psychiatric aides, but this has gradually disappeared as a result of the educational program and the improved attitude among the psychiatric aides.

There is still a considerable problem due to the turnover in employees, but this is less than it had been in the previous year. It would be of considerable value to be able to maintain a constant trained group of psychiatric aides in order to stabilize the care and treatment of the patients in all parts of the hospital.

For the most part, new employees have had no experience and it requires at least three months for them to complete the basic training given to the psychiatric aide. It is only after their initial training that they can be of any value. A considerable part of the turnover of the psychiatric aides occurs during their first six months of employment, and this is primarily due to the low salary scale. If the employees are to become more stabilized, it will be necessary to consider raising the salary level so that more efficient and better qualified individuals can be attracted to the position of psychiatric

aide. These employees are most important in the success of the treatment program which depends upon the attitude, understanding, and approach of the psychiatric aide to the mental patient.

#### OUTLOOK FOR THE FUTURE:

There are many intangible and unforeseeable factors which influence any future plans. An adequate budget is paramount in order to obtain personnel who are trained and who can add to the proposed program. Expansion of the present educational program to include psychiatric residences, the psychology department, and other training will depend upon an increase in the teaching personnel so that the hospital can obtain approval for the training. The development of this program would stimulate everyone and would raise the level of treatment in the hospital. Research must be stimulated in an attempt to understand the underlying factors leading to mental illness, to evaluate the results of our present treatment and to develop new treatments. Through education and research the Arizona State Hospital will be recognized as a center for the advancement of knowledge related to mental diseases.

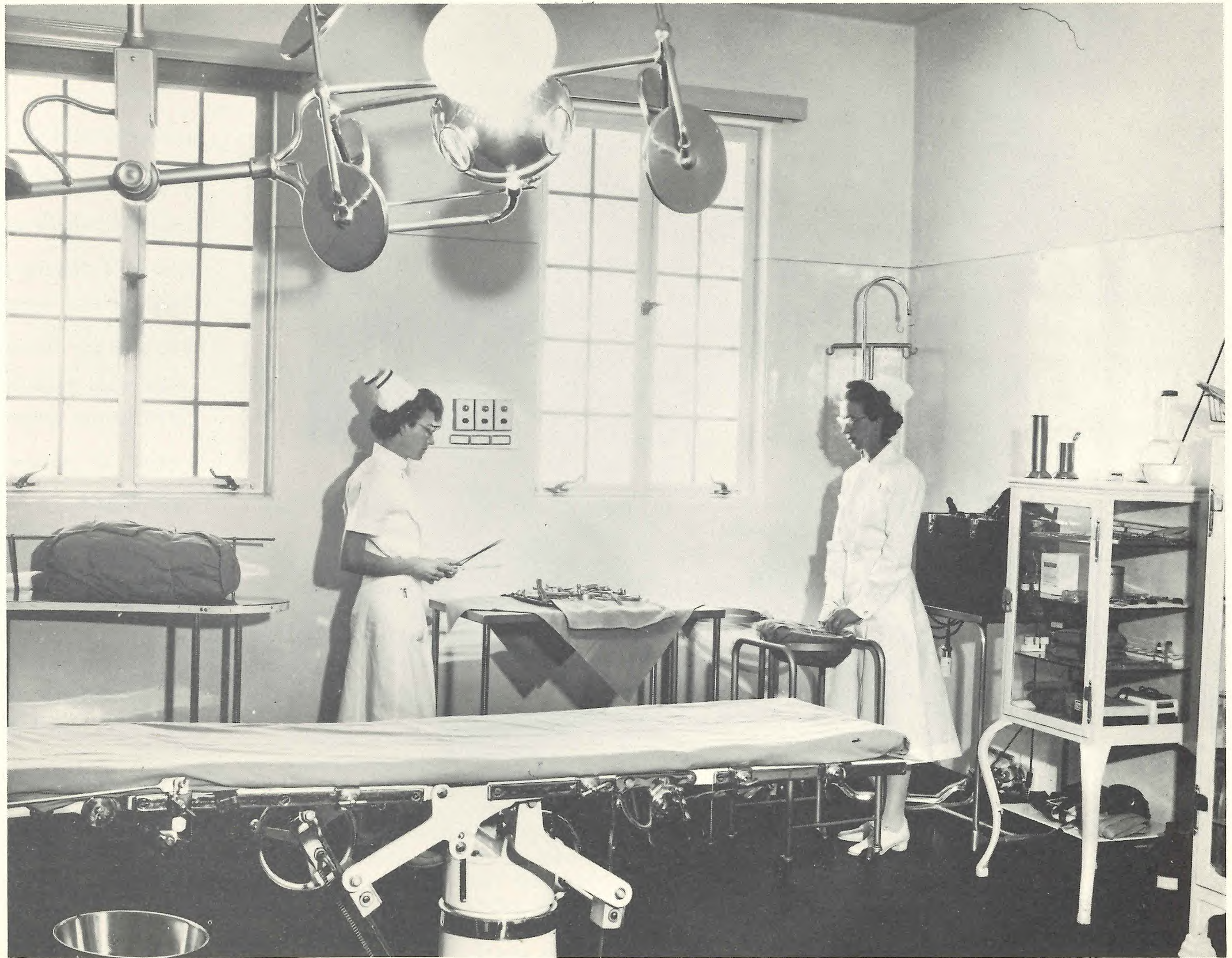
I express my sincere appreciation to the Hospital Board of Control for their encouragement and suggestions during the past year. I am certain that with their help and understanding, everyone in the hospital will co-operate so that the Arizona State Hospital will become an outstanding institution for the treatment of mental diseases.

Respectfully submitted,



Superintendent





## Surgery

Complete and modern surgical facilities  
are available at the State Hospital.





### Modern Electro-Shock Therapy

**MEDICAL STAFF:** In December 1953 Dr. M. W. Conway resigned as Director of the Arizona State Hospital and Dr. Samuel Wick was named as Acting Director with a permanent appointment on March 19, 1954. During this period there continued to be a shortage in the medical staff which has hampered us in an attempt to develop our treatment program to its fullest extent. All attempts are being made to obtain physicians who have been adequately trained in psychiatry and who are interested in improving the treatment program of the Arizona State Hospital. In the meantime the present medical staff has been most cooperative in carrying extra assignments so that everything could be accomplished. As our teaching and treatment programs develop, this should help in attracting new members to our staff. During the next year it will be necessary to increase the number allotted to the medical staff in order to give the best care and treatment to all patients. Listed below are the statistics of the medical staff activities for the year.

### Medical Staff Report

Number of Staff meetings held during year	162
Number of patients seen at staff meetings	1,125
Surgery performed (not including NSU)	27
Number of treatments given in Minor Surgery and dressing rooms	2,096
Electric Shock Therapy:	
149 male patients received 836 treatments	
482 female patients received 2,532 treatments	
Number of patients seen in GYN Clinic (Dr. Siegal)	173
Number of chest X-Rays read by Dr. Snyder	252
Autopsies performed: (Feb., March, Apr., May, June)	
Number of deaths	52
Autopsies performed	15
Percentage of autopsies	29%



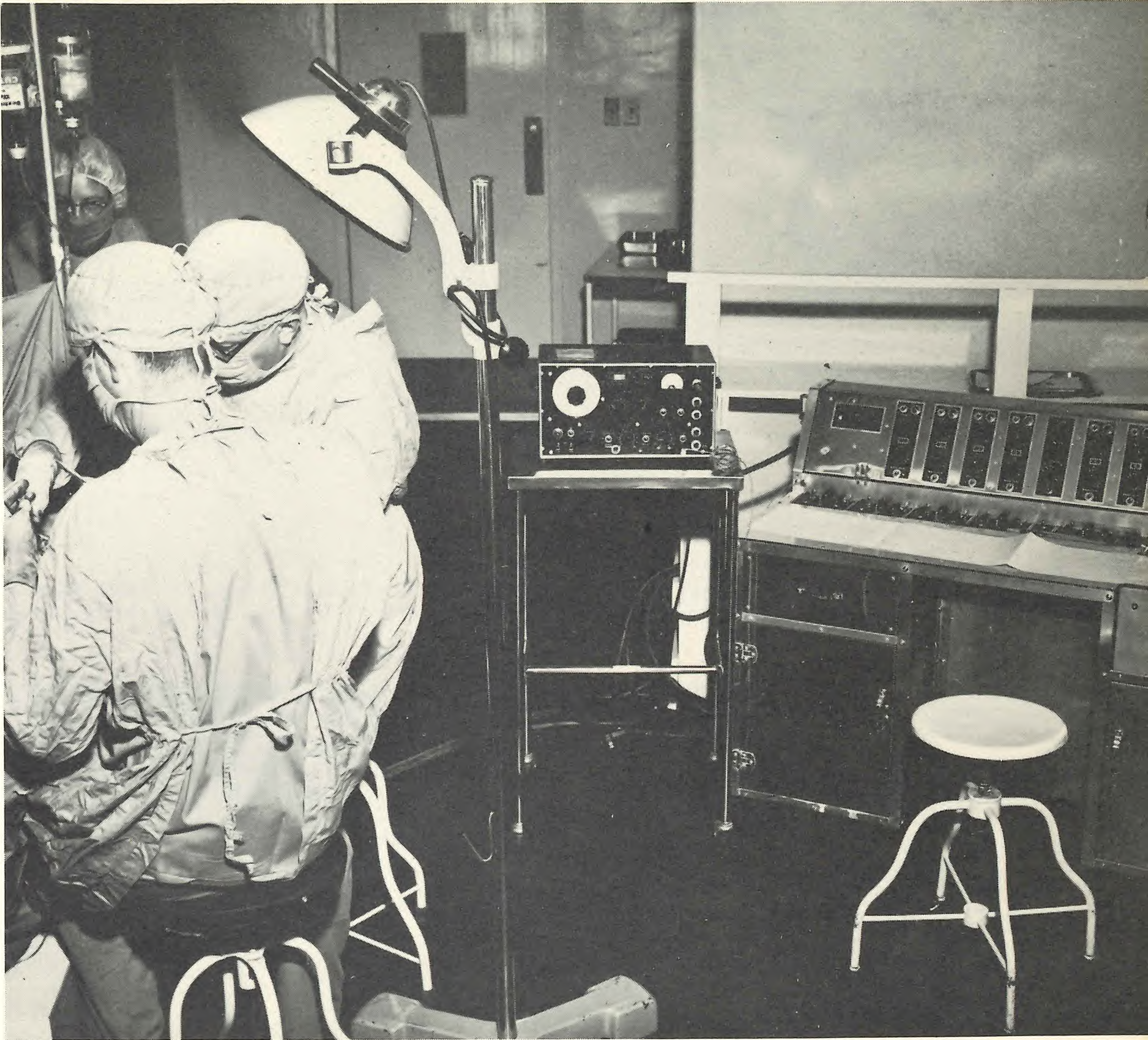
# Neurosurgical Report

## Hospital Patients

<b>I. Psychiatric and Neurosurgical Examinations:</b>		
A. Neurosurgical Examinations:		
1. Patients referred for Neurosurgical evaluation .....	72	
2. Re-examination of Neurosurgical Patients .....	94	
B. Psychiatric Evaluations: (by Staff Psychiatrists)		
1. Patients referred for Psychiatric evaluation .....	22	
2. Follow-up Psychiatric examinations..	12	
Total .....		200
<b>II. Electroencephalograms</b> .....		173
<b>III. X-Rays</b> .....		36
<b>IV. Surgical Procedures:</b>		
Dr. John R. Green, Neurosurgeon		
a. Cervical Meningocele .....	1	
b. Craniotomy .....	5	
c. Frontal Leukotomy .....	3	
d. Lumbar Puncture .....	1	
e. Orbitofrontal Lobotomy .....	2	
f. Pneumoencephalogram .....	18	
g. Spinal Tap .....	1	
h. Ventriculograms .....	3	
Total .....		34
<b>V. Clinical Pathological Conferences:</b>		
Conducted by:		
Dr. Harry F. Steelman, Neuropathologist		
Seven clinical pathological conferences were held during the fiscal year 1953-54. These conferences included the clinical records; differential diagnosis; gross autopsy-findings and sectioning for microscopic examination.		
Patients .....		27

## Out-Patient Report

<b>NUMBER OF PATIENTS</b>		
<b>Number of Examinations</b>		434
Neurological Evaluations	55	
Neurological and Neurosurgical return exam	128	
Neurological Consultations (Dr. John R. Green)	4	
Psychiatric Evaluations	39	
Psychiatric Consultations	91	
Electroencephalograms	101	
X-Rays	12	
Psychometric Tests	4	
Total		434



## Neurosurgery

Proper equipment and an adequate staff are essential to effective treatment.  
 Operation for Psychomotor Epilepsy, Electrostimulator and Electroencephalograph.



## Education

During the past year there has been a continuation of the training program for psychiatric aides. The first class in advanced training graduated March 19, 1954. This indicated another step forward in the entire program for the development of qualified personnel who would be equipped in a psychiatric sense to help with the treatment of the patients. The importance of this event was indicated by the fact that the entire Board of Control was present for this graduation ceremony. Since then a class in the Basic Training, and a class in the Advanced Training have completed the required course.

Plans have been discussed for designation of training wards where all new employees would be assigned as part of the training program. The new employees would be given instruction and supervision by experienced personnel while actually accomplishing the procedures on the ward. Following this orientation and indoctrination, the new employee would be assigned to other parts of the hospital and would be in a better position to understand the care of the mental patient.

Advanced Class of Psychiatric Aides, Graduation March 19, 1954. Miss Miriam Sholley, Director of Nursing Education, is shown fifth from the left in the front row.





## Student Nursing Affiliation

After many years of planning, the hospital finally obtained accreditation and approval by the Arizona State Board of Nurses Examiners for the establishment of a training center for the psychiatric affiliation of student nurses. The first class, consisting of nine student nurses from Good Samaritan Hospital, started on September 13, 1954. This can be considered a memorable day as the Arizona State Hospital is now able to provide psychiatric training for student nurses in Arizona for the first time. It will no longer be necessary for student nurses to leave the State to complete their training in this important field of medicine.

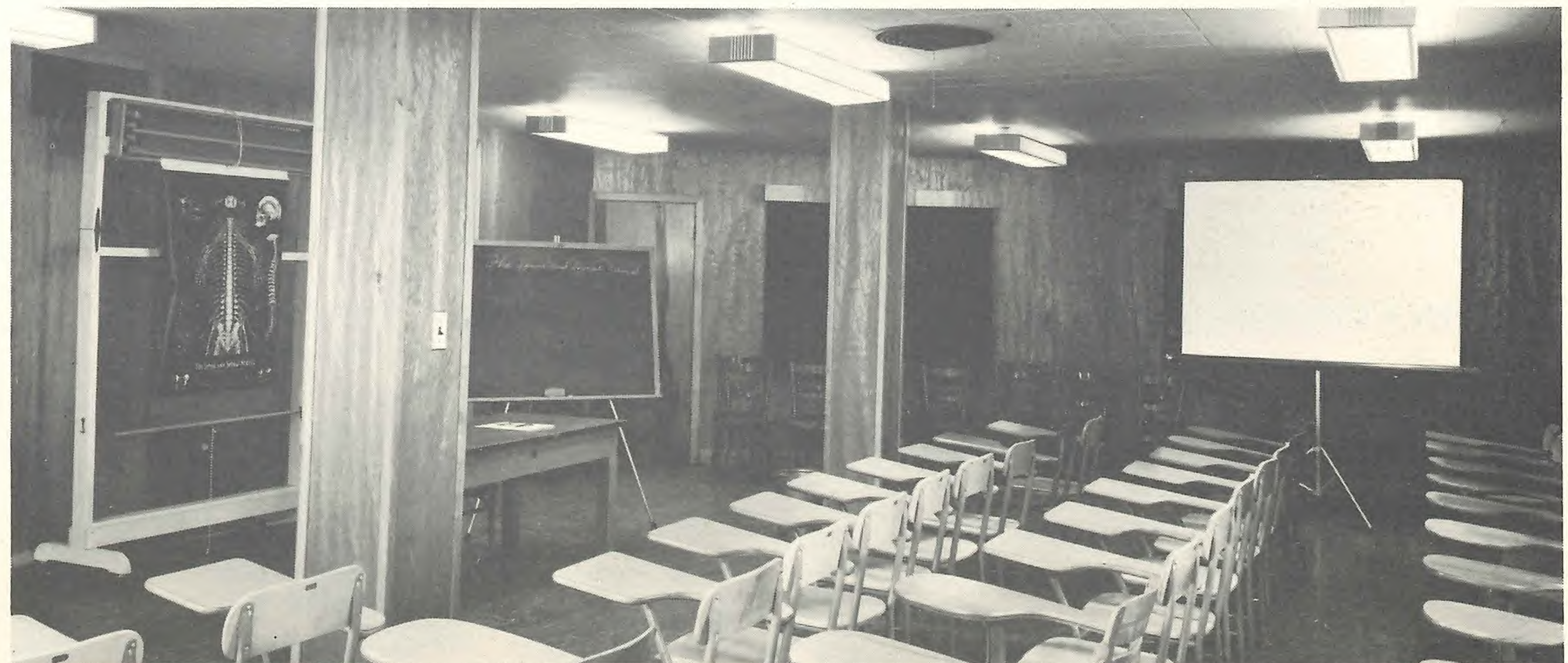
## Library

The Medical Library is now located in the remodeled area above the C building. The addition of new books and journals have made a beginning toward an adequate library to serve the hospital for reference, for teaching and for research purposes. All approved hospitals must maintain a medical library large enough for these purposes. The library is a necessity in the education of both the psychiatric aides and the student nurses.

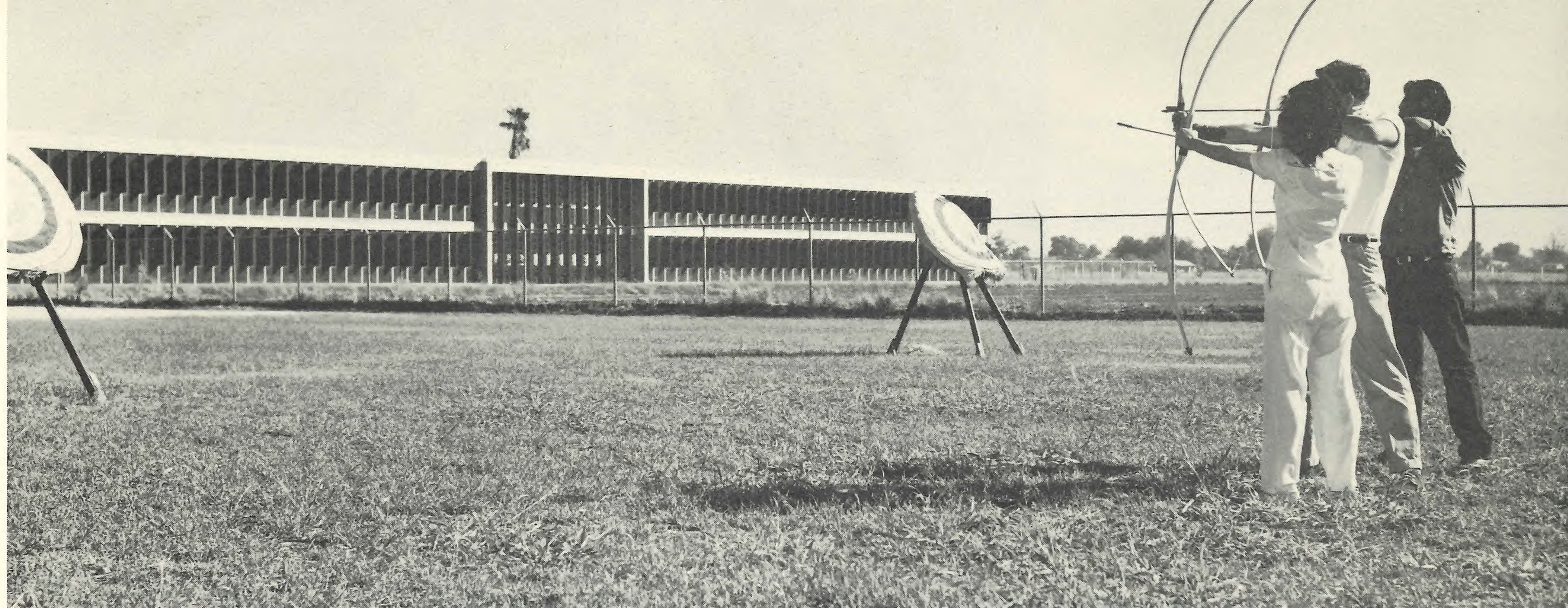


Reception for First Class of Student Nurses

Adjacent to the Medical Library is this classroom. Registered Nurses, Student Nurses and Psychiatric Aides all receive instructions in this room to enable them to treat patients effectively.







Two patients receive first instructions in the ancient sport of archery. Shown in the background is a new and modern hospital for treating tubercular mental patients.

## Recreational Therapy

Wholesome, supervised recreation is a part of total treatment program that leads to a normal way of life.





A Day in the Sun—  
This is the New Way



Morning Tennis Class

The Recreational Therapy Department has been expanded considerably during the past fiscal year. Carefully planned programs have been initiated to provide wholesome recreational activities for the greatest number of patients. Individual and group activities are available to all.

Various baseball teams have put on exhibition games for patients. These teams were sponsored by the American Legion, business men and local churches.

Our second annual Independence Day carnival was a big success. There

were booths, games, races, rides, refreshments and prizes for all.

The garden and tennis clubs have been active, and plans are being made for the organization of an Indian club.

Religious services by various denominations are held weekly. St. Mark's Parish provides the Catholic services. Protestant services are arranged through the Arizona Council of Churches.

Approximately 450 female patients and 600 male patients have participated in recreational activities, and more and more are being offered the opportunity to utilize our facilities.





All wards are scheduled and go to the Recreation Field periodically. Here they participate in various forms of applied recreation. These include archery, weight lifting, volleyball, calisthenics, softball, table tennis, and many others that can be adapted to the patients' condition and need.

Dances are held weekly in the auditorium. Movies are shown in the auditorium and on all wards unable to go to the auditorium. The Federated Musicians, American Legion, V.F.W., and other school and civic groups provide entertainment weekly.

A recreation room has been opened on Receiving East with pool table, ping pong, writing material, etc. Swimming parties and picnics were held throughout the year with a great number of patients able to participate.

"Fourteen Ball in the Side-Pocket"

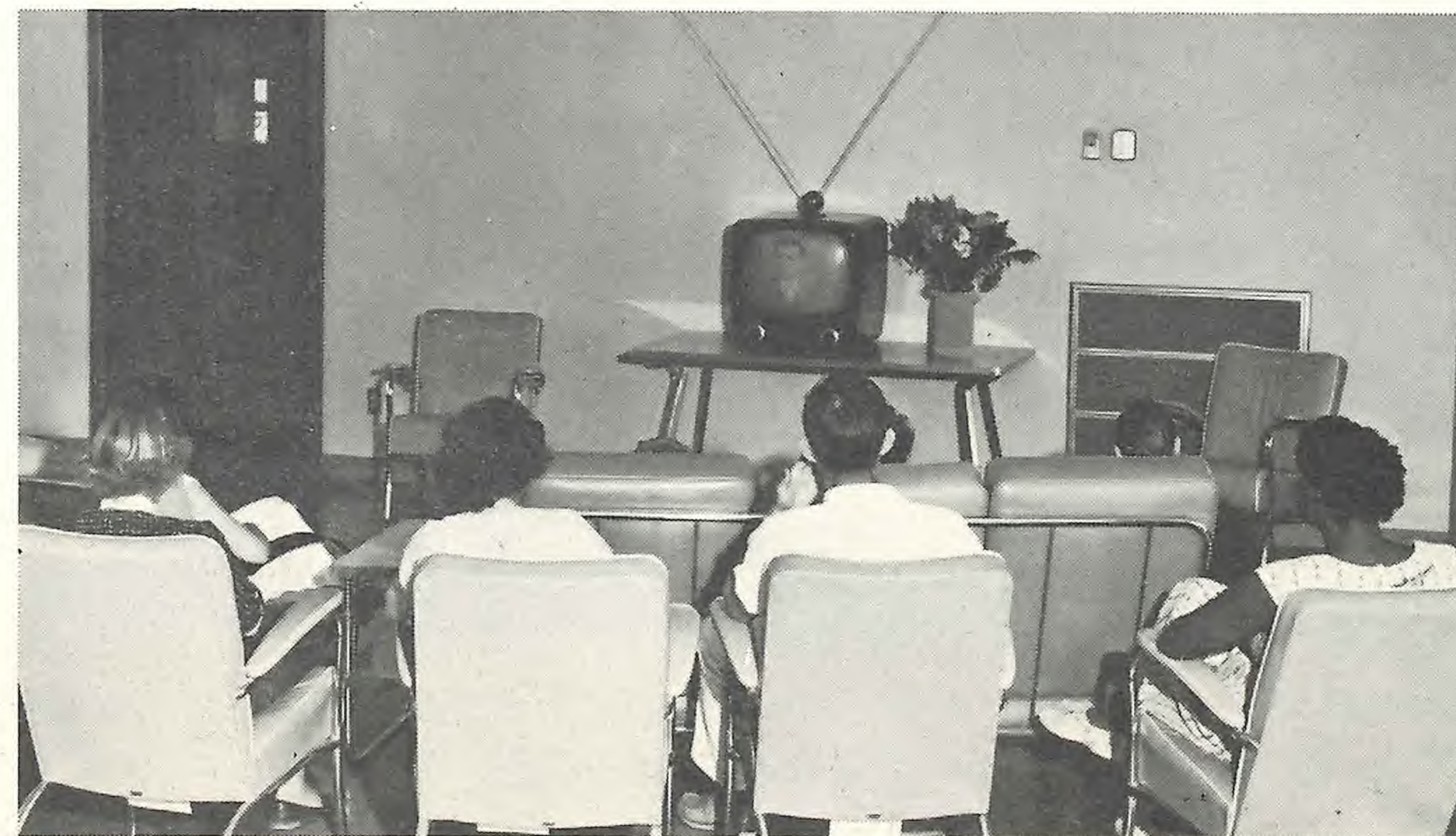




**"All Aboard for Arizona State Fair"**

Many patients were taken to the Rodeo Parade, State Fair, and the Indian Ceremonials. The patients' library is open four days a week under the direction of the Gray Ladies. The Gray Ladies take patients for walks and assist with activities on the Recreation Field.

Group singing and dance lessons are held for the patients weekly. Wards are equipped with television, radios, magazines, and games.



**A group of intensive treatment patients relax with a TV program in the dayroom.**



# Occupational Therapy Department

"Employment is nature's best medicine and essential to happiness." This statement of 172 A.D. is attributed to Galen, the famous Greek physician. The basic idea of using activity to aid in the recovery from disease or injury is almost as old as the practice of medicine itself; however, it is only since World War I that Occupational Therapy has developed as a science with specific objectives.

To be an integral part of treatment for the psychiatric patient, the principles and practices of Occupational Therapy must be based on valid psychiatric procedures. Just working with a patient who has been medically or psychiatrically diagnosed is not a sufficient criterion to label that performance as treatment. Occupational Therapy is first and foremost prescribed by the physician to augment psychotherapy and other definitive therapeutic efforts by providing opportunities for the expression or sublimation of emotional needs and drives. It is prescribed activity based on the needs, abilities and interests of the patient. The activity can be anything from conversation to calculus depending upon the psychological factors needed to interact on the situation. Improvement within the patient is the desired result, not a completed project.

The Occupational Therapy Clinic is a sheltered environment where the therapists should have time to work individually with the patients, helping them achieve an acceptable degree of initiative, independence, and socialization. At that time the therapist and the patient should both be thinking in terms of an Industrial Placement where the individual can test his ability to work with others, accept supervision and redevelop his work tolerance in preparation for discharge.

Early this year, our Occupational Therapy Department made a complete transformation from a crowded location into two new, well-equipped units with five people to guide the patients. To be able to meet the varied needs and interests of many individuals, a great variety of activities is available.

Several years ago when a craft program for the patients was first developed, there were no funds for materials or equipment. It was necessary for the director to utilize scrap materials, having the patients turn this salvage into salable items that would bring in money for needed equipment. However, now that the State of Arizona has recognized the value of Occupational Therapy by providing these two new units and allowing funds for their operation, this sale is no longer necessary, and actually it is detrimental to further progress of the department.

The patient in Occupational Therapy is not ready for pressure. When he is, he should move on to accepting more responsibility and proving his stability within the Industrial Program. Occupational Therapy aims to help new patients adjust to the hospital and accept treatment plans, to satisfy emotional needs, to re-establish work habits, to retard regression, to provide prevocational exploration and to prepare for post-hospital adjustment through avocational training and Industrial Placement.

Let us not talk about our Occupational Therapy Department by asking, "What kind of things do they make in O. T.?", or "Who made that item?", but let us be concerned with the effect of the treatments on the patients and put forth greater efforts to attain our therapeutic goals.

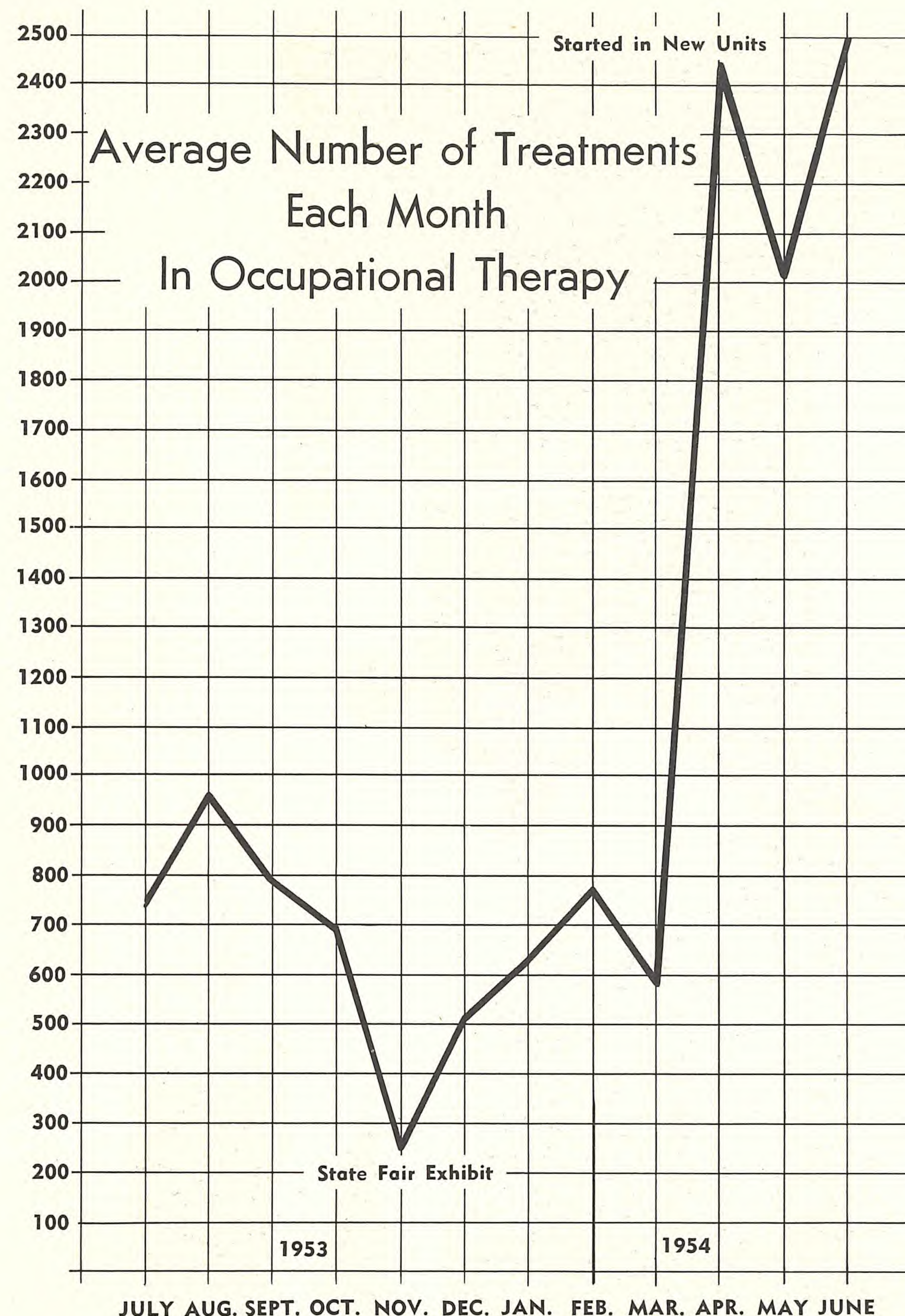




**“Occupied & Interested”**

**Patients are learning domestic and cultural practices under our enlarged Occupational Therapy program.**





This chart demonstrates the average number of treatments per month for this fiscal year report. It will be noted that during November of 1953 patient contacts were reduced by the participation of this department in State Fair activities. In April of 1954 patient contacts increased from 600 to 2,450 after the opening of new occupational therapy units.

During the entire year the amount of patient contact for this department consisted of 12,938 treatments for 303 different individuals. After moving into new units in the K Building during March, we have been able to see twice as many patients each month. The monthly average for the nine-month period before the move was 55, while 114 was the average for the last three months. Within the last quarter we averaged 2,328 treatments each month, while 638 was the average during the first nine months.

#### Ceramic Arts—Occupational Therapy

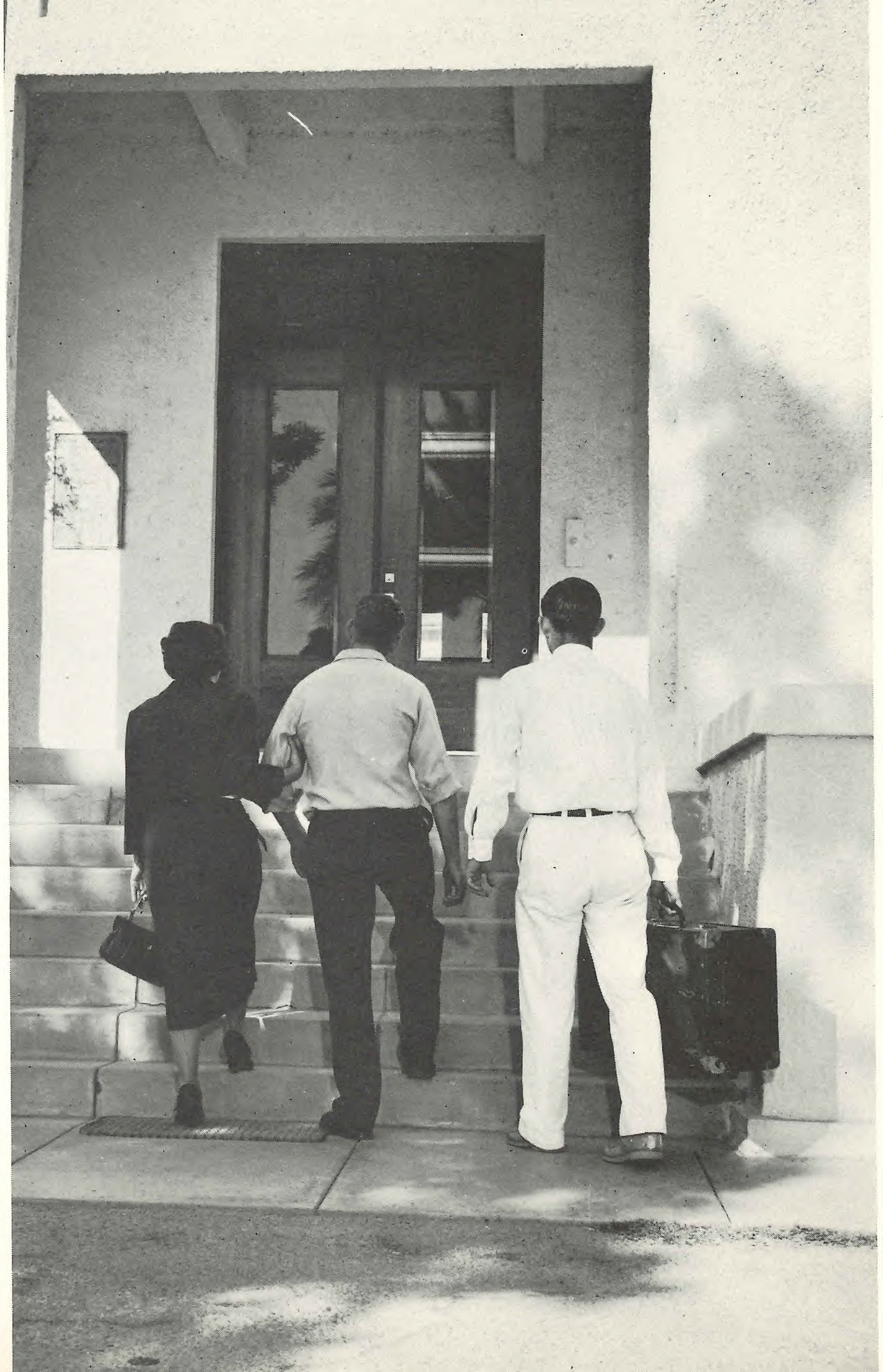




## Social Service

## In Need of Treatment

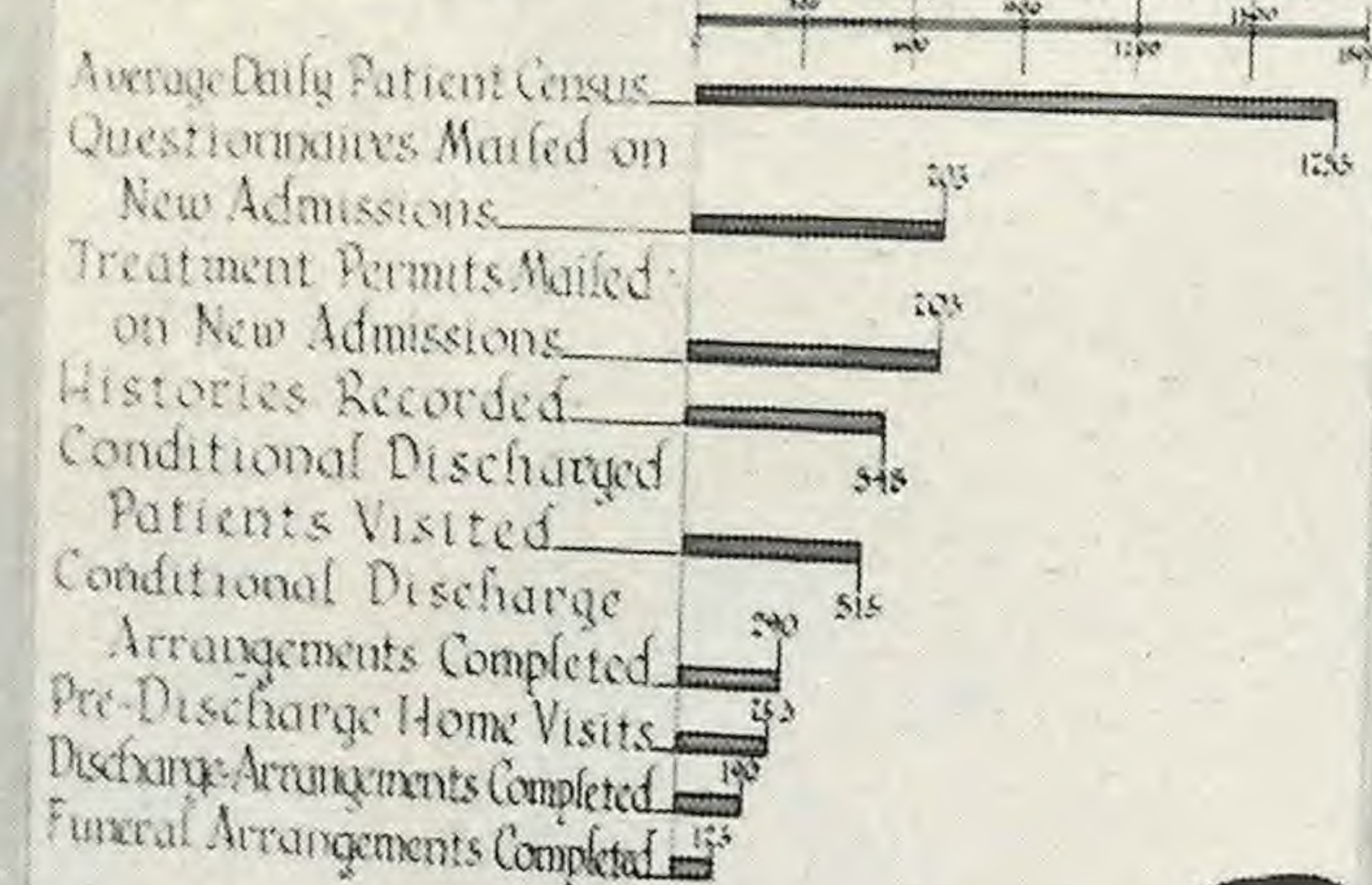
Admission to the Arizona State Hospital is routine and free of embarrassment. An incoming patient is soon aware that he is with people who can and will help him.





# SOCIAL SERVICE

## SOCIAL SERVICE REPORT FISCAL YEAR JULY 1, 1953 TO JUNE 30, 1954



## SERVICES RENDERED

### SOCIAL SERVICE DEPARTMENT

#### 1. SERVICES UPON PATIENT'S ADMISSION

- Securing case histories.
- Securing permission for treatment.
- Helping patient and family accept hospitalization.

#### 2. SERVICES DURING PATIENT'S HOSPITALIZATION

- Protecting patients outside interests.
- Keeping patient in contact with relatives.

#### 3. SERVICES PRIOR TO PATIENT'S DISCHARGE

- Consultations with patient regarding future plans.
- Consultations with patient's relatives.
- Investigation of home for suitability.
- Helping patient secure employment.

#### 4. SERVICES AFTER PATIENT'S DISCHARGE

- Monthly follow-up visits to patient and family.
- Helping patient re-adjust to community life.

From the moment a patient enters the Arizona State Hospital, all departments begin working toward the day when he will return home. Social Service coordinates the hospital, the patient and the family at home in this all-out effort to effect a cure and make it lasting.

Social Service display at the State Fair, explains services provided to the patient and his family.

Private interviews with interested members of the patient's family are a part of the process in the Social Service Department which helps in understanding the patient and continues the family contact and interest.





## Social Service Statistical Report

Histories Taken.....	548
Home Investigations, Pre-Discharge.....	253
Home Visits, Follow-Up.....	515
Deportation of Non-Residents.....	49
Arrangements Completed for Discharges .....	290
Arrangements Completed for Conditional Discharges.	190
Arrangements for Burials.....	123

## Returning Home





## Some Clinical and Therapeutic Functions.

To serve the medical needs of 1760 patients, it is important to have available a complete drug and narcotic department. To serve state economy it is wise to manufacture as many drugs as is possible; also, a Drug "Formulary" Committee is needed to avoid expensive duplication of drugs designed for the same purpose. These factors all obtained at the Arizona State Hospital.

In addition to managing the pharmacy operation, our pharmacist has served as Secretary of the Pharmacy and Therapeutic Committee, has conducted a refresher course in new drugs for our Registered Nurses and lectured on drugs in educational training classes for Psychiatric aides.

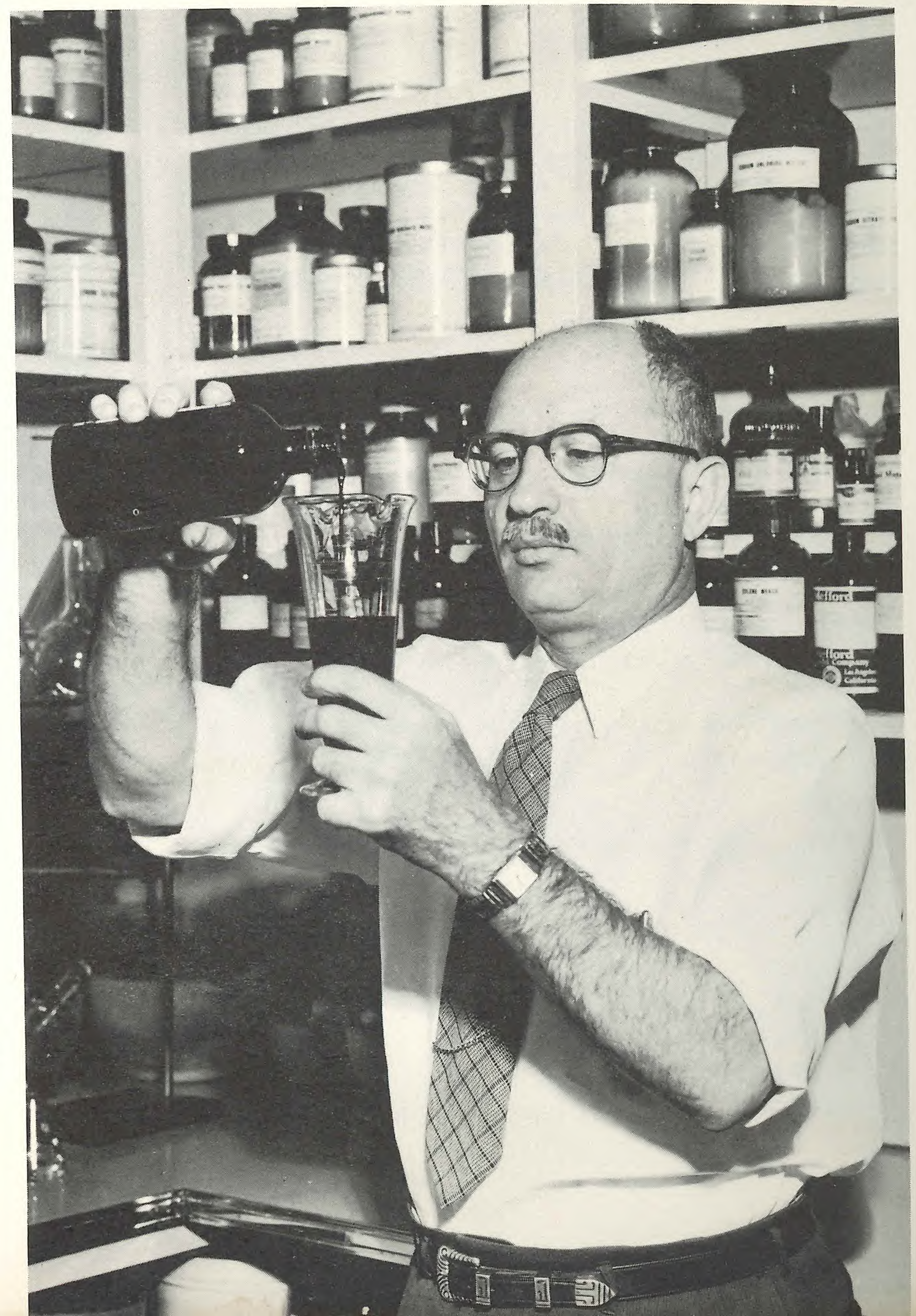
### Pharmacy Department Report

Requisitions filled .....4,159  
Items Supplied .....20,403  
Prescriptions filled for Employees .....1,089

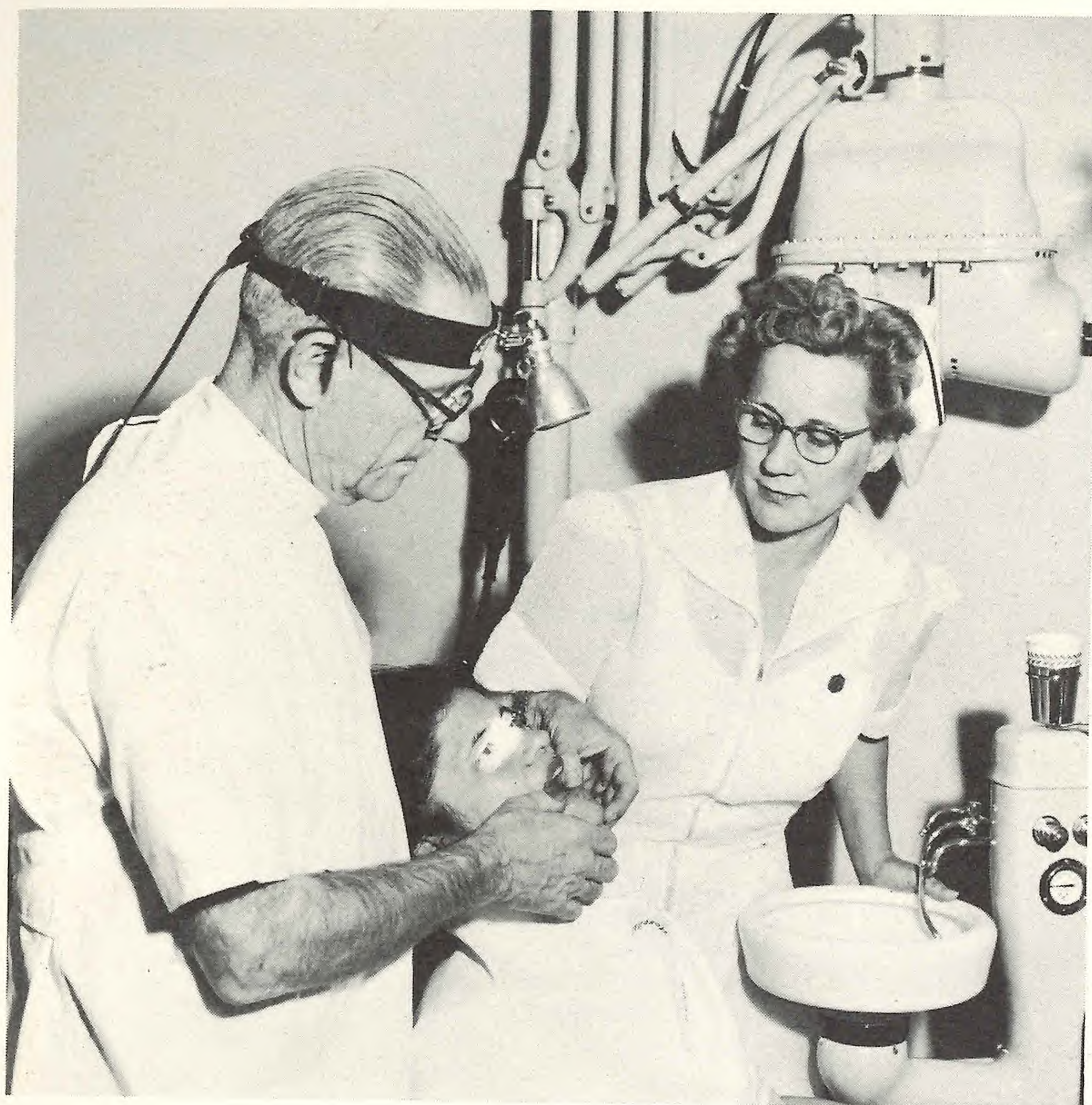
#### Manufactured:

Liquids .....986 gallons  
Ointments ..... 52 pounds  
Powders ..... 84 pounds  
Injectable Sol. ....14,760 cc

Arizona State Hospital is proud of this well-kept pharmacy and the vital role it plays in the health of all the patients.







Dental Office

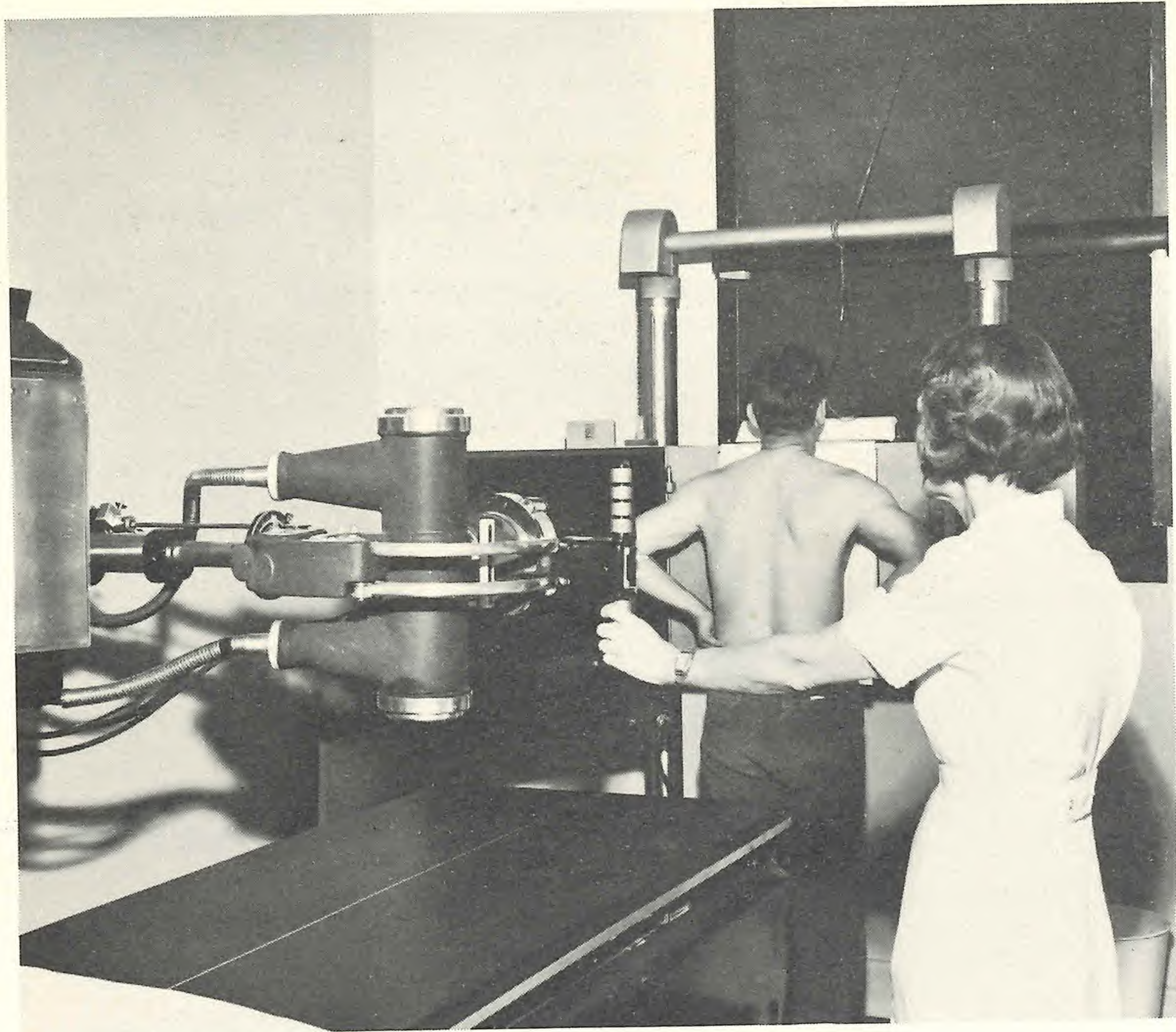
Complete dental service is rendered all patients at Arizona State Hospital. Listed below are the statistics of this important department.

## Dental Statistics

Cleanings .....	294
Post-operative treatments .....	954
Examinations .....	848
Extractions .....	1747
Fillings:	
Amalgam .....	87
Porcelain .....	74
Cement .....	2
Pyorrhea .....	811
Trench Mouth .....	4
Plate Repairs .....	54
Temporary Fillings .....	54
Adjustment of Dentures .....	467
Placed Dentures:	
Full Sets .....	17
Upper .....	1
Lowers .....	5
Partials .....	1
Impressions .....	18
Bites .....	19
Try In .....	25
Ward Calls .....	93
Penicillin .....	72
X-Rays .....	145
Lance Abscess .....	12
Night Calls .....	1
Sunday Calls .....	9
Alveolectomy .....	1
Biopsy .....	2
Incise Gums .....	1
Number of Patients Seen .....	3525



# X-Ray Department Statistics



Modern x-ray equipment is in constant use in the hospital. Here is shown the principal X-ray laboratory. X-ray equipment is available in a separate fracture room and in the X-ray department of our Tuberculosis Hospital.

Type of Examination	No. of Patients
Chest Plates, Patients (films used) . . . . .	925
Chest Plates, Employees . . . . .	264
Ribs (fractured 2) . . . . .	10
Extremities (fractured 39) . . . . .	139
Skulls . . . . .	62
Pneumoencephalograms . . . . .	18
Ventriculograms . . . . .	3
Noses (fractured 6) . . . . .	6
Maxilla . . . . .	1
Jaws (fractured 2) . . . . .	7
Thymus . . . . .	1
Shoulders (fractured 2) . . . . .	10
Humerus . . . . .	1
Elbows (fractured 2) . . . . .	3
Clavicals . . . . .	1
Cervical Spine . . . . .	2
Dorsal Spine . . . . .	15
Lumbar Spine . . . . .	13
Lumbo-Dorso . . . . .	5
Coccyx . . . . .	1
Femur (fractured 1) . . . . .	1
Hips (fractured 6) . . . . .	16
Pelvis (fractured 2) . . . . .	22
Knees (fractured 2) . . . . .	3
Hips pinned in surgery . . . . .	2
Abdomen . . . . .	8
Abdomen for pregnancy . . . . .	3
I. V. Pyelograms . . . . .	6
G. I. Series . . . . .	6
G. B. Series . . . . .	6
Barium Enemas . . . . .	2
Fluoroscopy . . . . .	18
K. U. B. . . . .	2
Full plate of infant . . . . .	1
Soft tissue for foreign objects . . . . .	2
E. K. G. . . . .	18

## FILMS USED

14 x 17 . . . . .	1462
10 x 12 . . . . .	457
8 x 10 . . . . .	80

Total . . . . .1999

New equipment installed February 15, 1954 thru April 1, 1954.



# Laboratory Statistical Report

Urinalysis .....	1,640
Hgb. Rbc. Wbc. ....	1,093
Differential Leukocyte Count .....	411
Malarial Smears .....	1
Sedimentation Rate .....	47
Reticulocyte Count .....	2
Platelet Count .....	18
Clot Retraction .....	18
Bleeding Time .....	1
Coagulation Time .....	1
Erythrocyte Fragility .....	1
Blood Typing (Group & Rh) .....	48
Cross Match .....	42
Icterus Index .....	18
Vandenbergh (Serum Bilirubin) ....	18
N.P.N. ....	23
Blood Sugar .....	113
Glucose Tolerance .....	1
Cholesterol .....	4
Blood Bromide .....	15
Blood Calcium .....	2
Blood Urea Nitrogen .....	1
Serum Total Protein .....	4
Albumin/Globulin Ratio .....	4
Spinal Fluid Sugar .....	2
Spinal Fluid Chloride .....	2
Urobilinogen in Urine .....	18
P.S.P. ....	4
Spinal Fluid Cell Count .....	232
Spinal Fluid Globulin (Pandy's) ....	232
Spinal Fluid Total Protein .....	232
Spinal Fluid Colloidal Gold .....	230
Spinal Fluid V.D.R.L. ....	230
Blood Serologies (Drawn & V.D.R.L.)	1,350
Blood Serology Dilutions .....	166



View of the Hospital's Pathological Laboratory. In a well-equipped laboratory diagnostic reports are quickly available to the medical staff.

Agglutinations .....	11	Basal Metabolism .....	13
Antibiotic Sensitivity Test .....	5	Feces Exam. ....	12
Papanicalaou Smears .....	10	Vomitus Exam. ....	1
Gram Stains .....	16	Milk Bacterial Plate Counts .....	210
Acid-Fast Stain for T.B. (Sputums and Gastric Lavages)...	112	Milk Phosphatase Pasteurization Test	77
Gastric Analysis .....	1	Biopsies .....	83
Exudate .....	1	Autopsies .....	37
Gastric Lavages .....	68		
Cultures .....	102		
		Total Procedures .....	6,993





Hydrotherapy—a treatment to bring calmness to a disturbed patient.

The hospital has three hydrotherapy units, one of them pictured above. The application of physiotherapy, including Hydrotherapy, is essential to modern treatment which discourages old-fashioned restraints.

## Hydrotherapy Report

Sedative Tubs .....	2,452
Sedative Packs .....	2,677
Alcohol Rubs .....	5,186
Oil Rubs .....	104
Infra Red .....	23
Soaks .....	253
Diathermy .....	303
Massage .....	221
Exercise .....	84
Ultra Violet .....	9

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Total .....11,312





## Twenty Years of Service

Recognition is in order for Mrs. Estella Stewart (left) and Mrs. Emma Scott, Psychiatric Aides with 20 years of service at Arizona State Hospital.

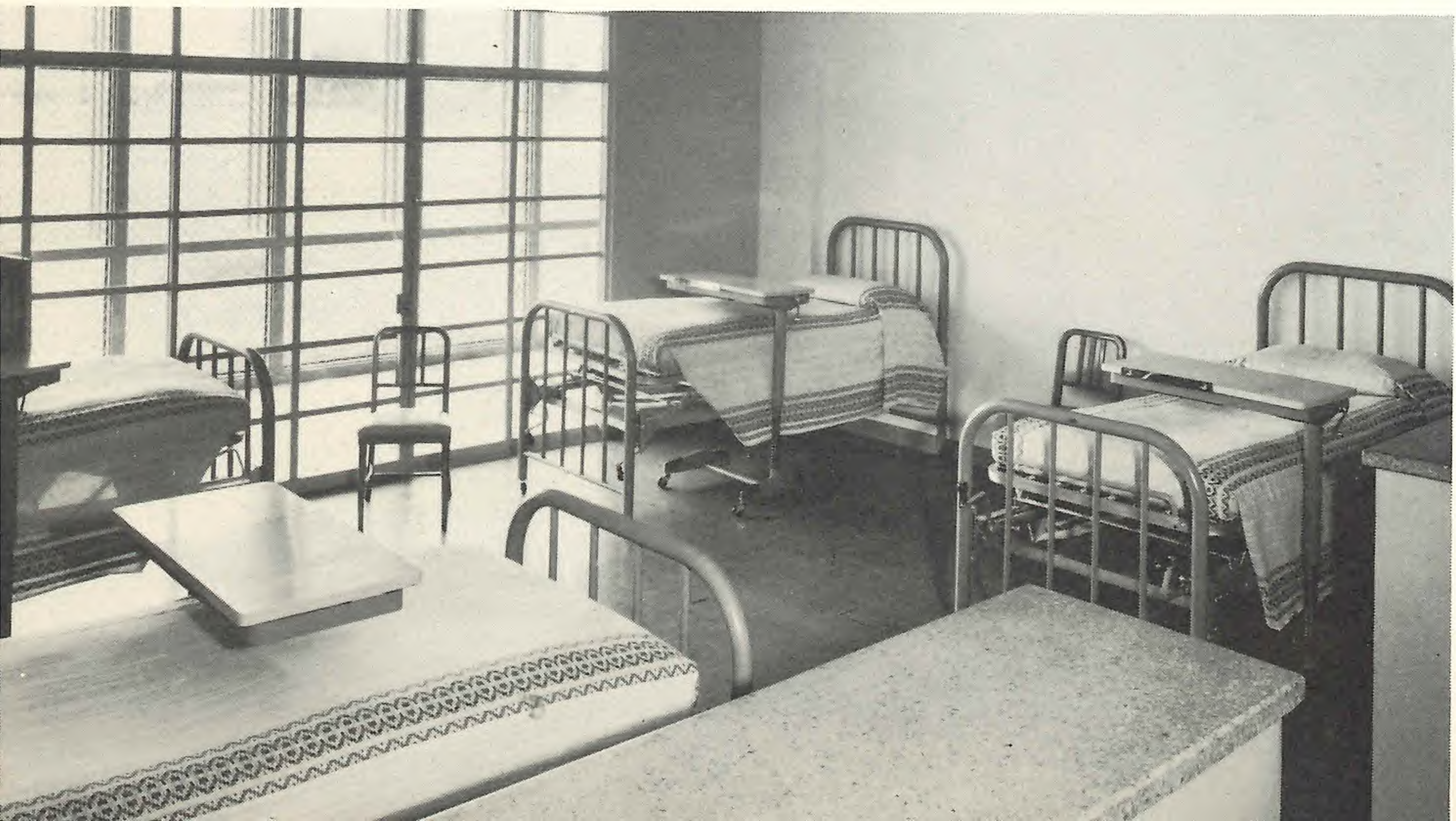
Making the awards are Mr. John Underwood of Tucson, member of the Board of Control, while Dr. Wick, Hospital Director, looks on in approval.





**This is the Dining Room for the Geriatric Building where aged patients gather to eat their meals.**

**Shown here is the view of the bedroom facilities provided to patients in the new tuberculosis hospital.**



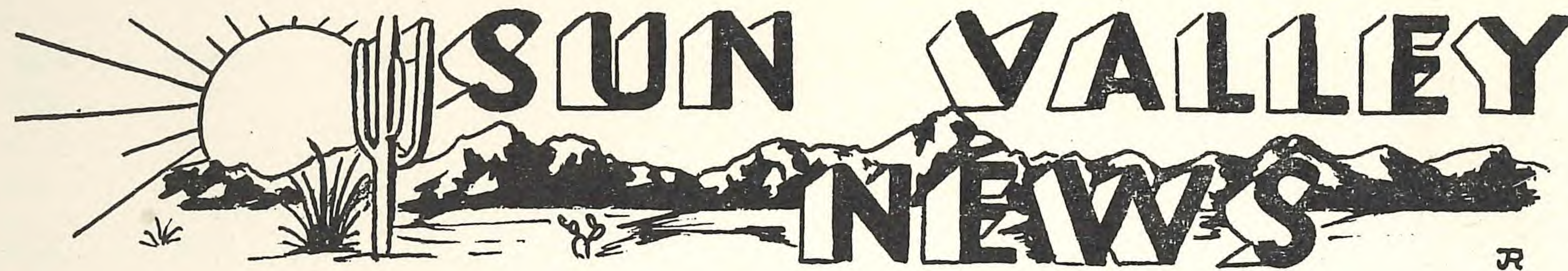
## **Hospital Buildings**

During the fiscal year 1953-54, the Hospital completed construction and equipping of five new buildings. Three of these were specialized treatment and ward residence buildings, one was a new supplies division warehouse and one was a new headquarters and shop building for maintenance functions. These new buildings are modern in every respect and are a fine addition to the Hospital, relieving a portion of the overcrowding.

It would not be proper in this report to give the impression that all of the Hospital's buildings are new, modern and in the best of repair. There are at least five buildings that need very extensive repair and two that require replacement. It is anticipated at this time that the American Psychiatric Association will recommend building renovations, replacements and additions requiring in excess of a million dollars in additional building funds. It is fair to point out that the Hospital staff has maintained an unusual standard of house-keeping even in the older buildings which are in need of extensive rebuilding. It is also necessary to point out that new buildings and the revision of old buildings to allow smaller groupings of patients for more individual patient care require additional hospital employees.

The Hospital anticipates suggestions from the inspection committee of the American Psychiatric Association that will revise the needed request for salary funds for the forthcoming fiscal year.





## ARIZONA STATE HOSPITAL

Vol. 1, No. 1

Phoenix, Arizona

January, 1954

The first issue of the Sun Valley News appeared in January of 1954. A four-page professionally printed monthly edited by hospital personnel, the paper contained news of interest to patient and employee. Articles and poems by patients are regular fea-

tures; information regarding events such as church services, movies, dances, as well as news from the wards keep patients up to date on hospital activities.

A column written by the Gray Ladies on the library contains a book

review each month; other regular departments are: a personality profile of an employee (with photograph), a column entitled "About Folks We Know," and one written by the Social Service Department named "Back in the Saddle" describing successful case histories. Each month the operation of some department is outlined, frequently illustrated with a picture.

Since the paper is sent to a select mailing list of interested people, a thank you column on the front page, "Muchas Gracias", expresses our appreciation of kind deeds and gifts to the Hospital. Under "Community Contacts" are listed the various persons and groups that visit the Hospital, as well as the activities of Hospital personnel in the Community.

The Editorial policy is to provide news and information for patients, employees and interested citizens.

### SUN VALLEY NEWS

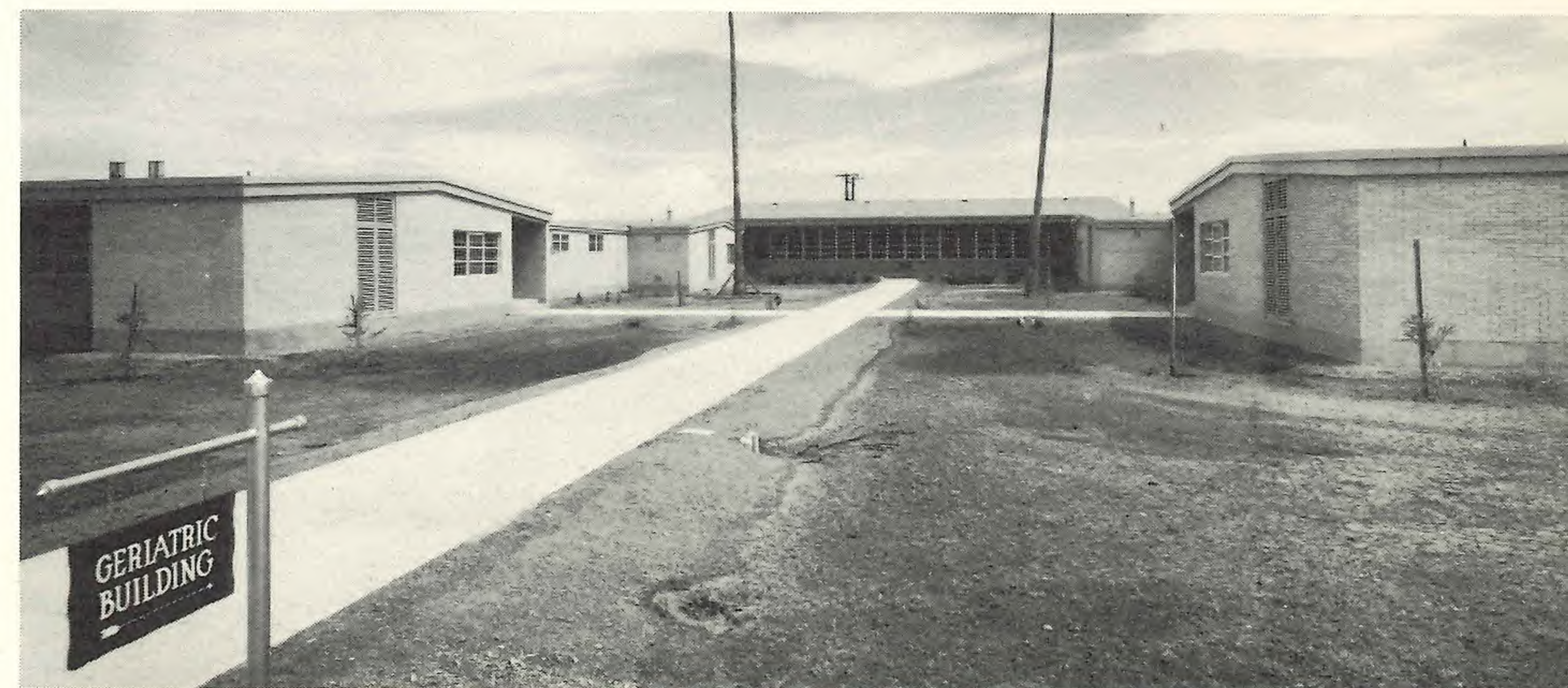
Editor: \_\_\_\_\_ Eli Schlossberg  
 Assistant Editor: \_\_\_\_\_ Dorothea K. Ryder  
 Art: \_\_\_\_\_ Jack Richards  
 Reporters: \_\_\_\_\_ Hazel Brook  
                                  Marjorie A. Evert  
                                  Bill Hersey  
                                  Adeline Rosenberg  
                                  Dorothy Wilson

Distribution: Occupational Therapy Department

Published by: Arizona State Hospital  
 2500 East Van Buren Street, Phoenix, Arizona

Director: \_\_\_\_\_ Samuel Wick, M.D.  
 Director of Nurses: \_\_\_\_\_ Mary Andersen, R.N.  
 Dir. Nursing Education: \_\_\_\_\_ Miriam I. Sholley, R.N.  
 Business Manager: \_\_\_\_\_ R. A. Clelland

All material for the SUN VALLEY NEWS should be handed in by the 20th of each month.



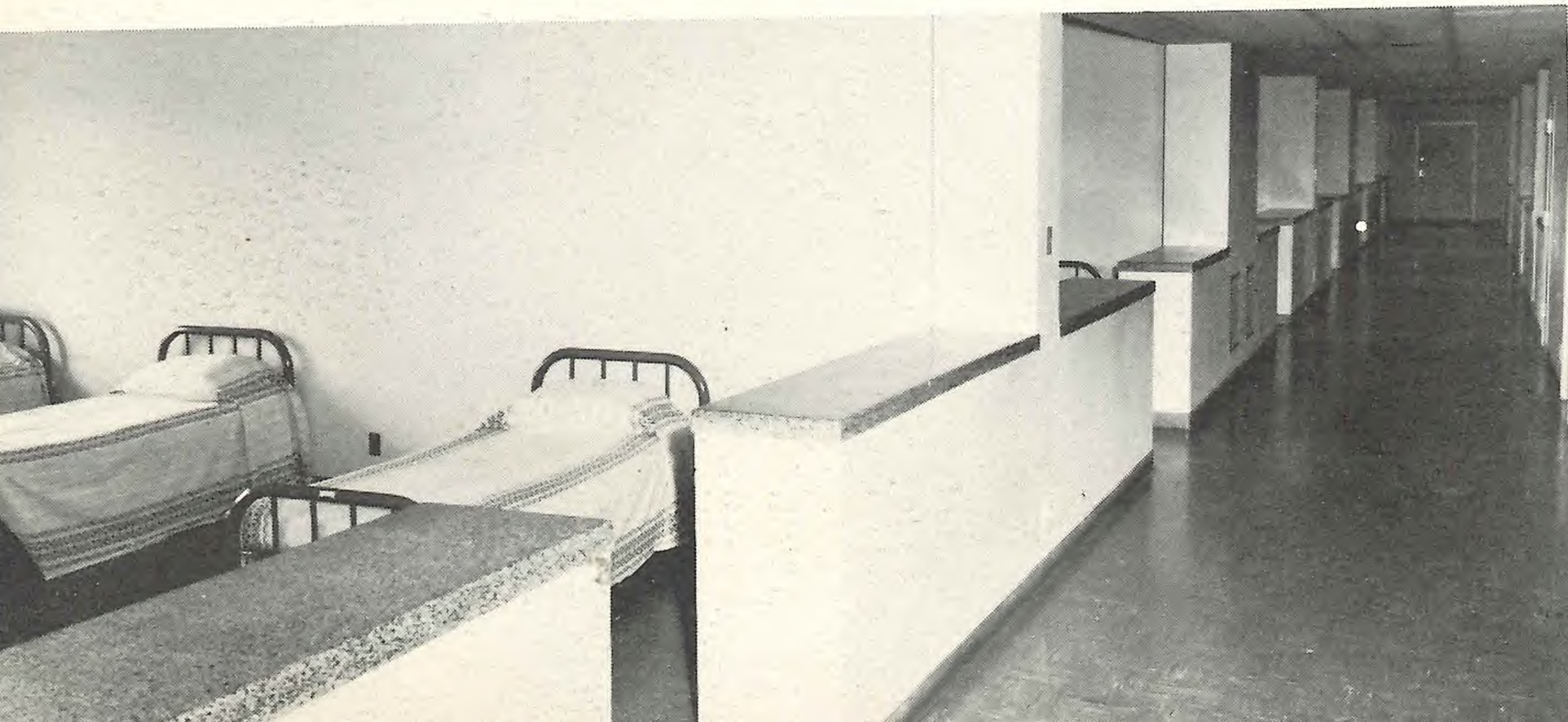
A modern home for aged mental patients. Here 400 members of Arizona families live and receive treatment.





The patients enjoy an afternoon of social activities under the able direction of the Gray Ladies of the Red Cross.

Typical living quarters in the new Intensive-Treatment Building for Arizona's mentally ill.



# Movement of Patient Population

	Male	Female	Total
In Hospital 7-1-53 .....	892	791	1,683
On Conditional Discharge .....	61	114	175
On Escape .....	23	1	24
<b>Total on Books .....</b>	<b>976</b>	<b>906</b>	<b>1,882</b>

## ADMISSIONS

Admissions 7-1-53 through 6-30-54 .....	354	255	609
Re-Admissions .....	47	48	95
Returned from Conditional Discharge .....	36	57	93
Returned from Escape .....	31	3	34
<b>Total Admissions .....</b>	<b>468</b>	<b>363</b>	<b>831</b>
<b>Total Patients Treated .....</b>	<b>1,444</b>	<b>1,269</b>	<b>2,713</b>

## SEPARATIONS

Discharged from Hospital .....	201	89	290
Discharged while on Cond. Disch. or Escape .....	95	112	207
<b>Total Discharged .....</b>	<b>296</b>	<b>201</b>	<b>497</b>
Deaths in Hospital .....	82	41	123
Deaths while on Cond. Disch. or Escape .....	3	1	4

<b>Total Deaths .....</b>	<b>85</b>	<b>42</b>	<b>127</b>
<b>Total Separations .....</b>	<b>381</b>	<b>243</b>	<b>624</b>
In Hospital 6-30-54 .....	903	850	1,753
On Conditional Discharge .....	75	115	190
On Escape .....	18	1	19

<b>Total on Books .....</b>	<b>996</b>	<b>966</b>	<b>1,962</b>
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## Length of Residence of Patients in Hospital as of June 30, 1954

Less than 1 year .....	146	181	327
1 year to 4 years .....	269	245	514
5 years to 9 years .....	192	172	364
10 years to 14 years .....	111	89	200
15 years to 19 years .....	62	53	115
20 years to 24 years .....	43	43	86
25 years to 29 years .....	27	27	54
30 years to 34 years .....	20	19	39
35 years to 39 years .....	19	10	29
40 years to 44 years .....	8	7	15
45 years to 49 years .....	3	2	5
50 years to 54 years .....	2	1	3
55 years to 59 years .....	1	1	2

<b>Total Residents .....</b>	<b>903</b>	<b>850</b>	<b>1,753</b>
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## Hospital Committees

**The Hospital Procedures Committee.** This group is the equivalent of the Standard Practice Department in industry. Its function is to establish the quickest and most economical way to accomplish routine functions.



**Purchasing.** This group selects the supplies for which the state expends a quarter of a million dollars each year. Specifications are written to assure that the State will receive durable goods. Broad invitations are issued for competitive bids to obtain rock-bottom prices. Department heads, who will use the goods, aid the business manager in inspecting samples and making selections.







## Hospital Coordinating Committee

This group meets once per week to evaluate employee suggestions and make recommendations to the Director. Representing large sections of the hospital, the members are in constant contact with all phases of its operation and make the Director's efforts more effective.

Left to Right: Dr. D. M. Bramwell, George Penrod, Arthur Tuskes, Dr. Samuel Wick, Merrill Moore, Mary Nugent, J. B. Richards.



## Patients' Statistics

On the following pages are eight tables of statistics to demonstrate the various types of disorders that resulted in commitment to the Hospital during the fiscal year. The totals show that 609 new patients were committed for treatment and 95 former patients were returned for additional care.

To the trained individual these columns of figures show interesting trends, comparing like records of Arizona's counties and showing comparisons over a period of years.

### I. FIRST ADMISSIONS

#### ACUTE BRAIN SYNDROMES

	Male	Female	Total
Associated with Alcohol Intoxication . . . . .	22	1	23
Associated with Drug or Poison Intoxication . . . . .	2	0	2
Associated with Convulsive Disorder . . . . .	0	0	0
Associated with Other Acute Brain Syndromes . . . . .	6	1	7

#### CHRONIC BRAIN SYNDROMES

Diseases and Conditions due to Prenatal Influence . . . . .	0	1	1
Meningoencephalitic Syphilis . . . . .	8	1	9
Other C.N.S. Syphilis . . . . .	1	0	1
Epidemic Encephalitis . . . . .	1	1	2
Other Intracranial Infections . . . . .	0	0	0
Alcohol Intoxication . . . . .	10	2	12
Drug or Poison Intoxication . . . . .	1	0	1
Birth Trauma . . . . .	1	1	2
Other Trauma . . . . .	7	1	8
Cerebral Arteriosclerosis . . . . .	69	34	103
Other Circulatory Disturbances . . . . .	7	2	9
Convulsive Disorder . . . . .	21	8	29
Senile Brain Disease . . . . .	15	9	24
Other Disturbance of Metabolism, Growth & Nutrition . . . . .	1	0	1
Intracranial Neoplasm . . . . .	2	1	3
Diseases of Unknown and Uncertain Cause . . . . .	2	1	3
Chronic Brain Syndrome of Unknown Cause . . . . .	2	1	3

#### PSYCHOTIC DISORDERS

Involutional Psychotic Reaction . . . . .	8	13	21
Manic-Depressive Reaction . . . . .	5	10	15
Psychotic Depressive Reaction . . . . .	1	9	10
Schizophrenic Reactions . . . . .	100	112	212
Paranoid Reactions . . . . .	3	4	7
Other . . . . .	0	0	0
Psychophysiologic Autonomic and Visceral Disorders . . . . .	0	1	1
Psychoneurotic Reactions . . . . .	10	16	26

#### PSYCHOGENIC DISORDERS

Personality Pattern Disturbance . . . . .	4	2	6
Personality Trait Disturbance . . . . .	3	5	8
Antisocial Reaction . . . . .	9	0	9
Dyssocial Reaction . . . . .	0	0	0
Sexual Deviation . . . . .	1	0	1
Alcoholism (Addiction) . . . . .	11	1	12
Drug Addiction . . . . .	0	1	1
Special Symptom Reaction . . . . .	1	0	1
Transient Situational Personality . . . . .	2	3	5
Mental Deficiency . . . . .	4	8	12
Without Mental Illness . . . . .	12	5	17
Mental Illness Undiagnosed . . . . .	2	0	2

TOTAL . . . . .	354	255	609
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## II. RE-ADMISSIONS

	Male	Female	Total
<b>ACUTE BRAIN SYNDROMES</b>			
Associated with Alcohol Intoxication	3	1	4
Associated with Drug or Poison Intoxication	0	0	0
Associated with Convulsive Disorder	0	0	0
Associated with Other Acute Brain Syndromes	0	0	0
<b>CHRONIC BRAIN SYNDROMES</b>			
Diseases and Conditions due to Prenatal Influence	0	1	1
Meningoencephalitic Syphilis	0	0	0
Other C.N.S. Syphilis	0	0	0
Epidemic Encephalitis	0	0	0
Other Intracranial Infections	0	0	0
Alcohol Intoxication	1	0	1
Drug or Poison Intoxication	0	0	0
Birth Trauma	0	0	0
Other Trauma	0	1	1
Cerebral Arteriosclerosis	4	2	6
Other Circulatory Disturbance	0	0	0
Convulsive Disorder	2	6	8
Senile Brain Disease	1	1	2
Other Disturbance of Metabolism, Growth and Nutrition	0	0	0
Intracranial Neoplasm	0	0	0
Diseases of Unknown and Uncertain Cause	0	0	0
Chronic Brain Syndrome of Unknown Cause	0	0	0
<b>PSYCHOTIC DISORDERS</b>			
Involuntal Psychotic Reaction	0	3	3
Manic-Depressive Reaction	2	4	6
Psychotic Depressive Reaction	0	1	1
Schizophrenic Reactions	18	26	44
Paranoid Reactions	1	1	2
Other	0	0	0
Psychophysiologic Autonomic and Visceral Disorders	0	1	1
Psychoneurotic Reactions	1	0	1
<b>PSYCHOGENIC DISORDERS</b>			
Personality Pattern Disturbance	1	0	1
Personality Trait Disturbance	0	0	0
Antisocial Reaction	3	0	3
Dyssocial Reaction	0	0	0
Sexual Deviation	0	0	0
Alcoholism (Addiction)	3	0	3
Drug Addiction	0	0	0
Special Symptom Reaction	0	0	0
Transient Situational Personality Disturbance	0	0	0
Mental Deficiency	5	0	5
Without Mental Illness	2	0	2
Mental Disorder Undiagnosed	0	0	0
<b>TOTAL</b>	<b>47</b>	<b>48</b>	<b>95</b>

## III. DISCHARGED MALES

Mental Diagnosis	Recvd.	Im- pvd.	Un- impvd.	While on C.D. or Esc.
<b>ACUTE BRAIN SYNDROMES</b>				
Associated with Alcohol Intoxication	20	3	0	2
Associated with Drug or Poison Intoxication	2	0	0	0
Associated with Convulsive Disorder	0	0	0	0
Associated with Other Acute Brain Syndromes	5	1	0	2
<b>CHRONIC BRAIN SYNDROME</b>				
Diseases and Conditions due to Prenatal Influence	0	0	0	0
Meningoencephalitic Syphilis	1	0	0	2
Other C.N.S. Syphilis	0	0	0	0
Epidemic Encephalitis	0	0	0	0
Other Intracranial Infection	0	0	0	0
Alcohol Intoxication	5	1	0	1
Drug and Poison Intoxication	0	0	0	0
Birth Trauma	0	1	0	0
Other Trauma	0	2	0	0
Cerebral Arteriosclerosis	2	2	3	10
Other Circulatory Disturbance	0	0	0	2
Convulsive Disorder	3	3	2	7
Senile Brain Disease	0	0	0	0
Other Disturbance of Metabolism, Growth and Nutrition	0	0	0	0
Intracranial Neoplasm	0	0	0	0
Diseases of Unknown and Uncertain Cause	0	0	0	0
Chronic Brain Syndrome of Unknown Cause	0	0	0	2
<b>PSYCHOTIC DISORDERS</b>				
Involuntal Psychotic Reaction	0	0	0	6
Manic-Depressive Reactions	1	1	0	4
Psychotic Depressive Reaction	1	0	0	0
Schizophrenic Reactions	2	13	15	44
Paranoid Reactions	0	1	0	4
Other	0	0	0	0
Psychophysiologic Autonomic and Visceral Disorders	1	0	0	0
Psychoneurotic Reactions	3	4	0	1
<b>PSYCHOGENIC DISORDERS</b>				
Personality Pattern Disturbance	0	0	5	2
Personality Trait Disturbance	0	0	3	0
Antisocial Reaction	0	0	11	1
Dyssocial Reaction	0	0	1	0
Sexual Deviation	0	0	1	1
Alcoholism (Addiction)	0	0	10	0
Drug Addiction	0	0	0	1
Special Symptom Reaction	0	0	1	0
Transient Situational Personality Disturbance	0	0	6	0
Mental Deficiency	0	0	8	3
Without Mental Illness	0	0	10	0
Mental Disorder Undiagnosed	0	0	1	0
<b>TOTAL</b>	<b>46</b>	<b>32</b>	<b>77</b>	<b>95</b>



#### IV. DISCHARGED FEMALES ACUTE BRAIN SYNDROMES

Mental Diagnosis	Recvd.	While on		
		Im- pvd.	Un- impvd.	C.D. or Esc.
Associated with Alcohol Intoxication . . . . .	1	1	0	0
Associated with Drug or Poison Intoxication . . . . .	0	0	0	0
Associated with Convulsive Disorder . . . . .	0	0	0	0
Associated with Other Acute Brain Syndromes . . . . .	0	0	0	0
<b>CHRONIC BRAIN SYNDROMES</b>				
Diseases and Conditions due to Prenatal Influence . . .	0	0	0	0
Meningoencephalitic Syphilis . . . . .	0	1	0	0
Other C.N.S. Syphilis . . . . .	0	0	0	0
Epidemic Encephalitis . . . . .	0	0	0	0
Other Intracranial Infections . . . . .	0	0	0	0
Alcohol Intoxication . . . . .	2	0	0	2
Drug or Poison Intoxication . . . . .	0	0	0	0
Birth Trauma . . . . .	0	0	0	0
Other Trauma . . . . .	0	0	0	2
Cerebral Arteriosclerosis . . . . .	0	0	0	3
Other Circulatory Disturbance . . . . .	0	0	0	2
Convulsive Disorder . . . . .	1	2	0	6
Senile Brain Disease . . . . .	0	0	1	2
Other Disturbance of Metabolism, Growth and Nutrition . . . . .	0	0	0	1
Intracranial Neoplasm . . . . .	1	0	0	1
Diseases of Unknown and Uncertain Cause . . . . .	0	0	0	0
Chronic Brain Syndrome of Unknown Cause . . . . .	0	0	0	2
<b>PSYCHOTIC DISORDERS</b>				
Involutional Psychotic Reaction . . . . .	0	1	0	8
Manic Depressive Reaction . . . . .	1	2	0	12
Psychotic Depressive Reaction . . . . .	3	0	0	1
Schizophrenic Reactions . . . . .	2	6	4	64
Paranoid Reactions . . . . .	0	1	0	3
Other . . . . .	0	0	0	1
Psychophysiologic Autonomic and Visceral Disorders . . .	1	1	0	0
Psychoneurotic Reactions . . . . .	5	2	0	1
<b>PSYCHOGENIC DISORDERS</b>				
Personality Pattern Disturbance . . . . .	0	0	1	0
Personality Trait Disturbance . . . . .	0	0	3	0
Antisocial Reaction . . . . .	0	0	0	0
Dyssocial Reaction . . . . .	0	0	0	0
Sexual Deviation . . . . .	0	0	0	0
Alcoholism (Addiction) . . . . .	0	0	1	1
Drug Addiction . . . . .	0	0	0	0
Special Symptom Reaction . . . . .	0	0	0	0
Transient Situational Personality Disturbance . . . . .	0	0	3	0
Mental Deficiency . . . . .	0	0	3	0
Without Mental Illness . . . . .	0	0	3	0
Mental Disorder Undiagnosed . . . . .	0	0	5	0
<b>TOTAL</b> . . . . .	<b>17</b>	<b>17</b>	<b>24</b>	<b>112</b>

#### V. DEATHS

July 1, 1953 through June 30, 1954

	Male	Female	Total
<b>ACUTE BRAIN SYNDROMES</b>			
Associated with Alcohol Intoxication . . . . .	1	0	1
Associated with Drug or Poison Intoxication . . . . .	0	0	0
Associated with Convulsive Disorder . . . . .	0	0	0
Associated with Other Acute Brain Syndromes . . . . .	0	0	0
<b>CHRONIC BRAIN SYNDROMES</b>			
Diseases and Conditions due to Prenatal Influence . . . .	0	0	0
Meningoencephalitic Syphilis . . . . .	2	1	3
Other C.N.S. Syphilis . . . . .	2	2	4
Epidemic Encephalitis . . . . .	0	0	0
Other Intracranial Infections . . . . .	0	0	0
Alcohol Intoxication . . . . .	1	0	1
Drug or poison Intoxication . . . . .	1	0	1
Birth Trauma . . . . .	0	0	0
Other Trauma . . . . .	1	0	1
Cerebral Arteriosclerosis . . . . .	39	13	52
Other Circulatory Disturbance . . . . .	5	1	6
Convulsive Disorder . . . . .	3	2	5
Senile Brain Disease . . . . .	13	8	21
Other Disturbance of Metabolism, Growth and Nutrition . .	0	0	0
Intracranial Neoplasm . . . . .	0	0	0
Diseases of Unknown and Uncertain Cause . . . . .	1	2	3
Chronic Brain Syndrome of Unknown Cause . . . . .	2	0	2
<b>PSYCHOTIC DISORDERS</b>			
Involutional Psychotic Reaction . . . . .	0	1	1
Manic-Depressive Reaction . . . . .	0	3	3
Psychotic Depressive Reaction . . . . .	0	0	0
Schizophrenic Reactions . . . . .	9	5	14
Paranoid Reactions . . . . .	0	0	0
Other . . . . .	0	0	0
Psychophysiologic Autonomic and Visceral Disorders . .	0	0	0
Psychoneurotic Reactions . . . . .	0	0	0
<b>PSYCHOGENIC DISORDERS</b>			
Personality Pattern Disturbance . . . . .	0	1	1
Personality Trait Disturbance . . . . .	0	0	0
Antisocial Reaction . . . . .	0	0	0
Dyssocial Reaction . . . . .	0	0	0
Sexual Deviation . . . . .	0	0	0
Alcoholism (Addiction) . . . . .	0	0	0
Drug Addiction . . . . .	0	0	0
Special Symptom Reaction . . . . .	0	0	0
Transient Situational Personality Disturbance . . . . .	0	0	0
Mental Deficiency . . . . .	3	2	5
Without Mental Illness . . . . .	1	0	1
Mental Disorder Undiagnosed . . . . .	1	1	2
<b>TOTAL</b> . . . . .	<b>85</b>	<b>42</b>	<b>127</b>



# VI. MOVEMENT OF PATIENT POPULATION BY COUNTIES

County	Received	Ret'd from Cond. Disch.		Dischd.	Expired
		Cond. Disch.	and Disch.		
Apache	3	3	4	5	2
Cochise	22	3	11	15	5
Coconino	19	4	5	13	5
Gila	15	1	7	10	8
Graham	4	1	2	2	2
Greenlee	3	0	0	2	1
Maricopa	365	81	187	283	57
Mohave	5	0	1	1	3
Navajo	5	1	4	3	2
Pima	168	18	84	90	17
Pinal	45	10	15	38	8
Santa Cruz	11	0	7	8	4
Yavapai	18	2	9	11	8
Yuma	21	3	12	16	5
TOTAL	704	127	348	497	127

# VII. TOTAL NUMBER OF PATIENTS COMMITTED TO ARIZONA STATE HOSPITAL DURING THE PAST TEN YEARS.

	Male	Female	Total
1944	278	203	481
1945	323	193	516
1946	342	215	557
1947	338	232	570
1948	381	258	639
1949	453	267	720
1950	495	327	822
1951	391	335	726
1952	474	355	829
1953	396	299	695
TOTAL	4,135	2,861	6,996

# VIII. MOVEMENT OF FOREIGN POPULATION

July 1, 1953 through June 30, 1954

Country	In Hosp. 7-1-53	Rec'd.	C.D. Esc.	Ret'd.	Disch.	De-ported	Died	In Hosp. 6-30-54
Armenia	0	1						1
Austria	17	2			1		1	17
Canada	5	4			1			8
China	3		1					2
Cuba	1							1
Czechoslovakia	1							1
England	4							4
Finland	1							1
France	1							1
Germany	8	2	1		1		1	7
Greece	5		1	1				5
Hungary	0	2			1			1
India	0	1						1
Ireland	3	2					1	4
Italy	3	2					1	4
Jamaica	1							1
Japan	2							2
Lithuania	0	1			1			0
Mexico	32	27	10	3	5	4	9	34
Norway	1							1
Poland	6							6
Rumania	2							2
Russia	5	3						8
Scotland	3		1	1				3
Spain	4							4
Sweden	6						1	5
Turkey	1							1
Yugoslavia	1							1



# Arizona State Hospital

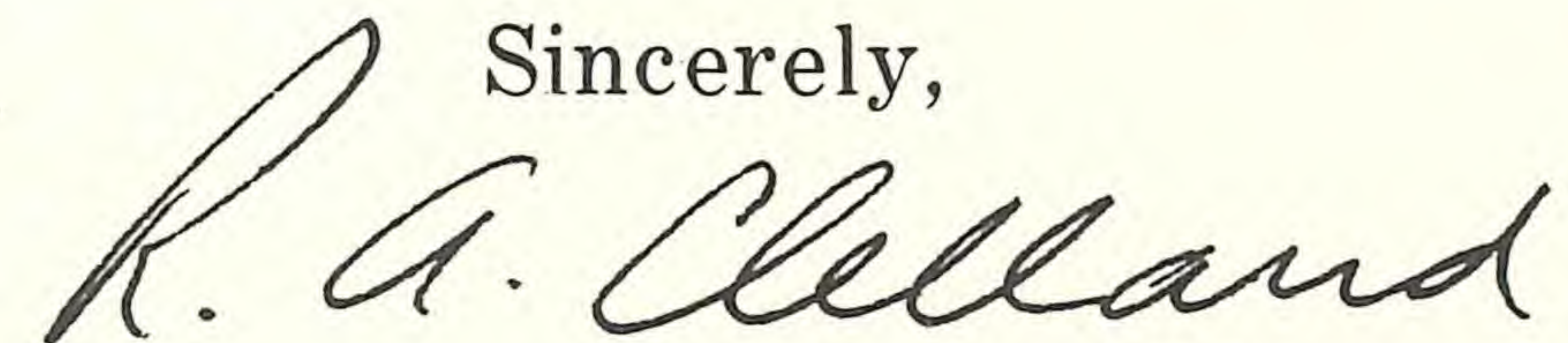
## Annual Report of the Business Manager

July 1, 1953 — June 30, 1954

On the pages of this report immediately following is the required accounting of funds received and expended. In addition, the productive and service departments list their activities for the fiscal year.

Your attention is invited to the increased collection of funds made by Business personnel (total \$194,629.46) and the amount reverted to the State's general fund (\$96,242.05).

Sincerely,

A handwritten signature in cursive script, reading "R. A. Clelland". The signature is written in dark ink and is positioned above the printed name of the Business Manager.

Business Manager



Expenditure Report

July 1, 1953 through June 30, 1954

	Appropriations Collections & Fund Balances	Expended	Balance 6-30-54	Reverted to General Fund	Fwd. to 1954-55
1-3-11-000-0100 Personal Services .....	\$1,066,450.00	\$1,033,331.07	\$ 33,118.93	\$ 890.44	\$32,228.49
1-3-11-000-0200 Current Expenditures .....	117,890.00	99,382.01	18,507.99	18,507.99	-0-
1-3-11-000-0201 Other Supplies & Parts .....	255,000.00	251,560.06	3,439.94	3,439.94	-0-
1-3-11-000-0202 .....	5,000.00	3,645.83	1,354.17	1,354.17	-0-
1-3-11-000-0203 Food .....	300,000.00	256,374.22	43,625.78	43,625.78	-0-
1-3-11-000-0300 Subscr. & Organization Dues .....	150.00	147.80	2.20	2.20	-0-
1-3-11-000-0401 Travel - State .....	3,000.00	2,462.13	537.87	537.87	-0-
1-3-11-000-0402 Travel - Out of State .....	3,500.00	3,233.32	266.68	266.68	-0-
1-3-11-000-0800 Special Operating .....	194,629.46	171,077.26	23,552.20	23,552.20	-0-
1-3-11-000-0900 Fixed Charges .....	5,760.00	1,996.74	3,763.26	3,763.26	-0-
1-3-11-000-0501 Capital Outlay - Powerhouse Equipment .....	10,250.00	10,152.70	97.30	97.30	-0-
1-3-11-000-0502 Capital Outlay - Buildings & Improvements .....	1,041.33	1,041.00	.33	.33	-0-
1-3-11-000-0504 Capital Outlay - Livestock .....	400.00	400.00	-0-	-0-	-0-
1-3-11-000-0505 Capital Outlay - Automotive Equipment .....	11,750.00	11,568.93	181.07	181.07	-0-
1-3-11-000-0506 Capital Outlay - Miscellaneous..	7,000.00	6,977.30	22.70	22.70	-0-
1-3-11-000-0509 Capital Outlay - Renovation, Bldgs. and Equipment .....	1,453,039.11	1,452,191.90	847.21	-0-	847.21
1-3-11-000-0510 Capital Outlay - Security Ward, Store- room & Maintenance Bldg .....	190,075.00	189,229.41	845.59	-0-	845.59
1-3-11-000-0511 Capital Outlay - Buildings & Improvements .....	32,500.00	32,499.88	.12	.12	-0-
2-3-11-000-0700 Endowment Earnings .....	46,946.39	42,765.92	4,180.47	-0-	4,180.47
Total Available for Expenditure .....	\$3,704,381.29				
Total Expended .....		\$3,570,037.48			
Balance June 30, 1954 .....			\$134,343.81		
Reverted to General Fund .....				\$96,242.05	
Balance Forward 1954-55 .....				\$38,101.76	

Classification of Expenditures

July 1, 1953 through June 30, 1954

Code	Item	Amount
110	Personal Services (Salaries .....	\$1,033,331.07
211	Postage .....	1,606.28
212	Telephone, Telegraph & Clock Service .....	6,562.12
215	Heat, Light, Power & Water Service .....	70,783.93
220	Travel - State .....	2,462.13
230	Travel - Out of State .....	3,863.38
240	Professional Fees .....	10,080.66
260	Maintenance of Buildings, Grounds & Equipment .....	45,038.15
270	Care of Institutional Wards .....	16,885.83
290	Other Contractual Services .....	16,022.38
321	Food .....	256,930.48
380	Other Supplies & Parts .....	324,366.94
380	Clothing .....	28,449.98
417	Other Rent .....	2,703.30
430	Subscriptions & Organization Dues .....	3,909.76
440	Refunds & Indemnities .....	98.25
600	Equipment .....	143,760.26*
460	Discharge Money - Institutional Inmates .....	115.80
720	Buildings and Improvements .....	1,559,900.86*
740	Livestock .....	400.00
Total .....		\$3,527,271.56

\* These items represent that part of the fund for constructing and equipping five new buildings. In a year when no new buildings were being erected the normal budget would be reduced by this amount.

From this classification of funds, it can be seen that the consumption of supplies, food and utilities in a large hospital is huge. Largest of the budget items is Personal Services.



# Budget For The Year 1954-55

During the fiscal year from July 1, 1954 through June 30, 1955, the hospital will operate on the budget shown below. This will consist of the amount (\$38,101.76) carried forward, the appropriated amount (\$1,985,727.00) and a conservative estimate of collections (\$170,000.00)

	Appropriation	Carried Fwd. From 1953-54
Personal Services:		
Salaries .....	\$1,200,600.00	
Employers' Contribution, OASI & State Retirement .....	66,033.00	
	<u>\$1,266,633.00</u>	
Personal Services—Additional Employees .....		\$ 32,228.49
Current Expenditures—Other .....	645,390.00	
Subscription & Organization Dues .....	650.00	
Travel — State .....	3,000.00	
Travel — Out of State .....	300.00	
Capital Outlay — Hydrotherapy Facilities.....	4,400.00	
Capital Outlay — Building Improvements, Equipment & Livestock .....	36,544.00	
Capital Outlay — Textbooks .....	100.00	
Fixed Charges .....	2,310.00	
Discharge Money .....	200.00	
Care of Institutional Patients — Outside Services .....	20,000.00	
Return of Patients .....	6,200.00	
Capital Outlay — Renovation, Bldgs. & Equipment .....		847.21
Capital Outlay — Security Ward, Storeroom & Maintenance Building .....		845.59
Endowment Earnings .....		4,180.47
	<u>\$1,985,727.00</u>	<u>\$ 38,101.76</u>
		1,985,727.00
		<u>\$2,023,828.76</u>
Estimated Collections:		
Endowment Earnings .....	20,000.00*	
Maintenance Collections .....	150,000.00	
	<u>151,000.00</u>	170,000.00
<b>Total Budget for Year 1954-55 .....</b>		<b>\$2,193,828.76</b>



Farm Production Report

The Arizona State Hospital Farm supplies all of the Hospital's needs for milk, pork, eggs, chicken, turkey, approximately 10 per cent of our beef consumption and approximately 30 per cent of our consumption of fresh vegetables. The farm operated at a profit balance of \$48,027.79, which is an increase over the previous year's profit balance, amounting to \$3,299.97. It should be noted that in the farm's operating expenses there was expended \$2,832.45 to level land which previously had been relatively unproductive and to place it into vegetable production. Otherwise, this figure would be reflected in an increased profit balance.

It is interesting to observe that this farm operation also affords constructive industrial therapy treatment for fifty to one hundred patients throughout the entire year. As in all industrial assignments, those who are assigned to farm duties have been carefully screened to determine that the work they will perform is sufficiently challenging so as to avoid boredom and at the same time will be within the capabilities of the patient.

	Unit	Unit Price	Total Unit Value	Total
Garden Produce:				
Beet Greens .....	8,840	.02	\$ 176.80	
Beets .....	64,890	.03	1,946.70	
Broccoli .....	4,040	.05	202.00	
Cabbage .....	44,570	.02	891.40	
Cantaloupe .....	59,460	.02	1,189.20	
Carrots .....	76,495	.03	2,294.85	
Cauliflower .....	4,440	.05	222.00	
Cucumbers .....	38,780	.04	1,551.20	
Egg Plant .....	3,080	.04	123.20	
Endive .....	2,240	.05	112.00	
Garlic .....	300	.08	24.00	
Green Onions .....	39,230	.04	1,569.20	
Lettuce .....	45,840	.05	2,292.00	
Onions .....	74,640	.02	1,492.80	
Parsley .....	1,190	.03	35.70	
Peppers, Bell & Chili .....	6,720	.06	403.20	
Radishes .....	2,585	.03	77.55	
Rutabagas .....	7,850	.02	157.00	
Spinach .....	22,720	.06	1,363.20	
Squash .....	42,940	.03	1,288.20	
Sweet Potatoes .....	21,050	.03	631.50	
Tomatoes .....	89,680	.04	3,587.20	
Turnip Greens .....	15,330	.02 1/2	383.25	
Turnips .....	22,100	.02 1/2	552.50	
	699,010 lbs.			
Green Corn .....	1,611 doz.	.25	402.75	\$ 22,969.40
Eggs .....	21,130 doz.	.50		10,565.00
Milk .....	134,352 gal.	.70		94,046.40
Meat:				
Beef .....	5,088 lbs.	.40	2,035.20	
Pork .....	75,758 lbs.	.25	18,939.50	
	80,846 lbs.			20,974.70
Poultry:				
Fryers .....	4,694 lbs.	.45	2,112.30	
Hens .....	7,037 lbs.	.40	2,814.80	
Turkeys .....	21,577 lbs.	.45	9,709.65	
	33,308 lbs.			14,636.75
Total Value of Farm Products .....				\$163,192.25
Operating Expenses .....			86,945.93	
Farm Salaries .....			28,218.53	
Total Production Cost .....				115,164.46
			Profit Balance	\$ 48,027.79



Farm Livestock Report

COWS:			
On hand July 1, 1953 .....	102		
Increase from Heifers .....	31		
		133	
Butchered .....	8		
Died .....	9		
		17	
On hand June 30, 1954.....			116
HEIFERS AND CALVES:			
On hand July 1, 1953 .....	108		
Born .....	106		
		214	
Matured to Cows .....	31		
Butchered .....	33		
Died .....	11		
		75	
On hand June 30, 1954 .....			139
BULLS:			
On hand July 1, 1953 .....	2		
Purchased .....	2		
		4	
Butchered .....		1	
On hand June 30, 1954 .....			3
HOGS:			
On hand July 1, 1953 .....	461		
Born .....	629		
		1,090	
Butchered .....	377		
Died .....	28		
		405	
On hand June 30, 1954 .....			685
CHICKENS:			
On hand July 1, 1953 .....	1,902		
Purchased .....	3,300		
		5,202	
Butchered .....	2,256		
Died .....	945		
		3,201	
On hand June 30, 1954 .....			2,001
TURKEYS:			
On hand July 1, 1953 .....	1,164		
Hatched .....	1,500		
		2,664	
Butchered .....	329		
Died .....	721		
		1,050	
On hand June 30, 1954 .....			1,614



Farm manager prepares tur-  
key flock for vaccination.

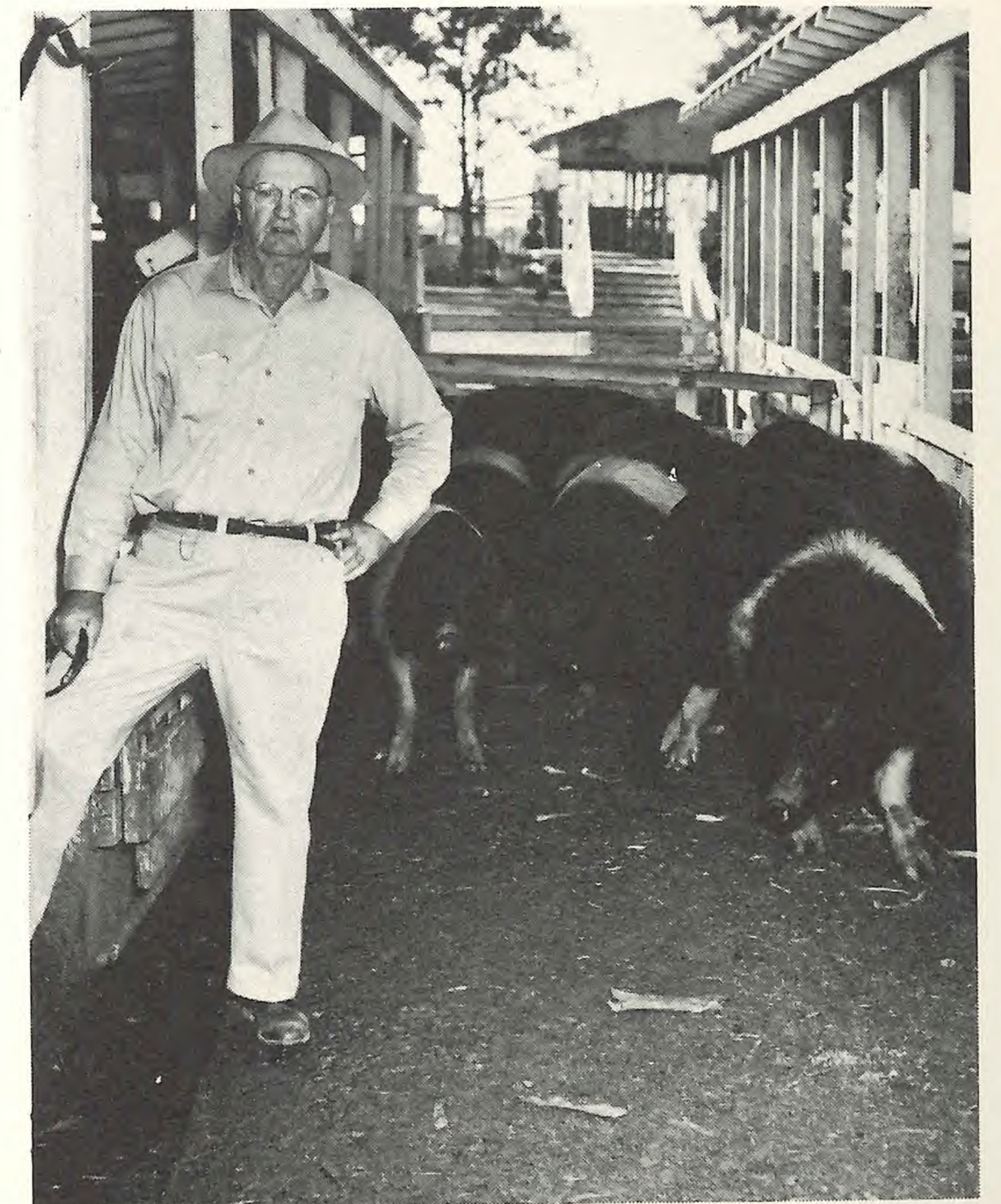




The hospital's dairy herd is composed of prize producing Herefords from registered stock. Here the Dairy Supervisor directs patients in cleaning cows before the milking operation.

Milking is done mechanically and the milk pasteurized and processed in our own plant under regular inspection by the State Health Department.

Farm Manager, inspecting swine.





# Food Service and Supplies Departments

Here is a record of the canning done in the hospital cannery to conserve produce from our farm for consumption out of season.

## Canning Report

	No. 10 Cans
Beets	5,041
Bread & Butter Pickles	1,488
Carrots	4,579
Cucumber Relish	2,079
Green Tomato Pickles	59
Pears	939
Pepper Relish	507
Sauer Kraut	2,018
Spinach	935
Tomatoes, Solid Pack	3,631
Tomato Relish	2,524
Tomato Sauce	1,266
Total	25,066

To aid state economy, Hospital management applies for all surplus food which it is eligible to receive. Here is a record of the food furnished during the year by the Federal Surplus Program.

	Cases
Beef & Gravy	201
Butter	282
Canned Beef	34
Canned Milk	34
Cheddar Cheese	118
Dried Milk	138
Frozen Beef	35
Ground Beef	18
Olive Oil	10
Processed Cheese	118
Salad Oil	90
Wholesale Value of Surplus	
Foods Received	\$60,569.72
Total Handling Charges paid	1,370.24

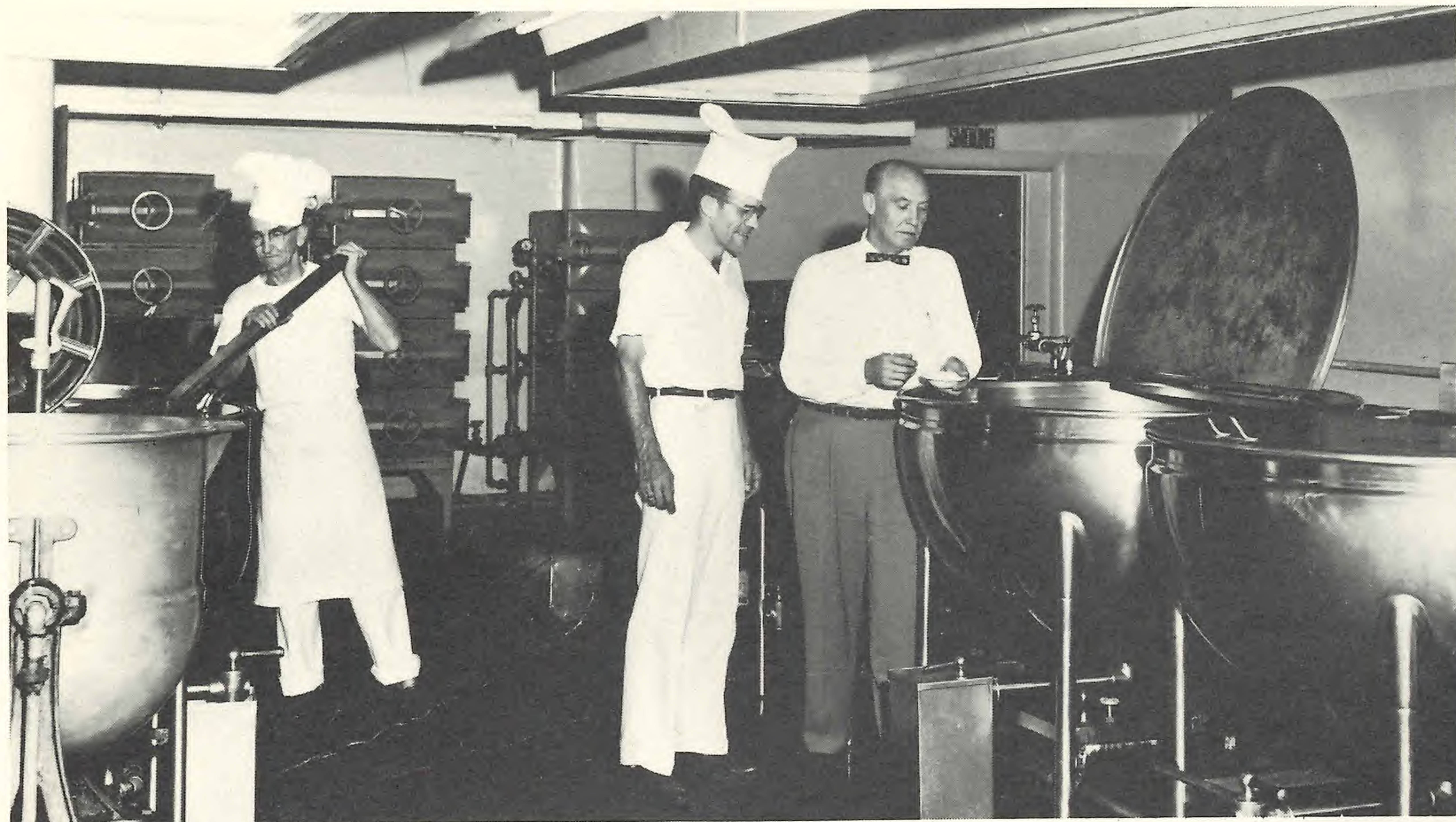


The hospital's grocery store begins compiling orders to send food supplies to the principal kitchen, four special diet kitchens, two cafeterias, eight outlying dining rooms, twenty-seven supplemental feeding pantries, and the homes of twenty employees who live on the hospital grounds.

## Inventory of Supplies in Storeroom

	At Conclusion of Fiscal Year
Food .....	\$38,360.93
Supplies .....	42,789.91
TOTAL .....	\$81,150.84





Our main kitchen, showing steam kettles. Wholesome, appetizing, well balanced diets are fed to all patients. Separate diet kitchens are maintained to serve the needs of tuberculars, diabetics, geriatric patients, ulcer patients and a variety of other special diets.

The Arizona State Hospital is a "city within a city" with nearly 2,300 inhabitants (patients and personnel). Here is pictured the main warehouse of the Supplies Department. Daily receipts and deliveries are made through this area on thousands of items.





The two production reports listed below make clear the size of the State Hospital and its enormous consumption of supplies.

## Sewing Room Report

Aprons .....	1,483
Bags (Condemning) .....	16
Bags (Pastry) .....	7
Bags (Sand) .....	28
Bags (Surgery) .....	6
Bed Covers .....	4
Bed Pads .....	2
Bed Pan Covers .....	49
Bed Spreads .....	2
Bed Spread Skirts .....	2
Buffet Pad .....	1
Butcher Coats .....	6
Camisoles .....	36
Caps (Kitchen) .....	59
Cradles .....	2
Curtains .....	69
Curtains (Dishwashing) .....	4
Curtains (Shower) .....	6
Diapers .....	313
Draperies .....	125 pr.
Dresser Scarves .....	72
Dresses (Better) .....	1,203
Dresses (Heavy) .....	1,642
Drop Cloths .....	22
Gowns (Plain) .....	1,269
Gowns (Tie Back) .....	1,215
Gowns (Surgery) .....	62
Hammocks .....	8
Hamper and Laundry Bags .....	367
Ironing Board Covers .....	8
Mattress Covers (Rubber) .....	182
Napkins .....	120
Pan Covers .....	48
Panties .....	1,704
Pantry Covers .....	2
Pillows .....	4

Pillow Slips .....	228
Pillow Slips (Rubber) .....	22
Pillow Ticks (Rubber) .....	52
Pot Holders .....	24
Restraint Bands .....	59
Sanitary Bands .....	240
Sanitary Pads .....	1,713
Sheets .....	570
Sheets (Draw) .....	207
Sheets (Rubber Draw) .....	126
Sheets (Rubber) .....	120
Slips .....	1,771
Shrouds .....	6
Table Cloths .....	20
Towels (Bath) .....	729
Towels (Hand) .....	1,723
Towels (Tea) .....	2,750
Tub Covers .....	5
Turkey Saddles .....	180
Uniforms .....	44
Valances .....	8
Wash Cloths .....	180
Wrappers .....	48

## Beauty Shop Report

July 1, 1953 through June 30, 1954

Braids .....	455
Brow Arches .....	28
Facials .....	12
Finger Waves .....	4,876
Hair Cuts .....	973
Hair Dressings .....	4,735
Manicures .....	1,922
Oil Treatments .....	23
Permanents .....	274
Shampoos .....	4,876
Rinses .....	4,742
Number of Patients Accommodated: .....	5,187



Cost of Maintaining Patients

During the fiscal year just concluded the hospital reached a peak of over 1750 patients, with an average daily patient load of 1703.

Excluding capital outlay costs, these patients were afforded increased therapy and more care from an increased staff at a daily cost per patient of \$2.94!

Cost in other states vary from a poor standard of \$1.21 to an ostentatious \$5.70 per day, with a national average of \$3.10.

Maintenance Collections

Arizona law wisely provides that any mental patient pay for his care if he is financially able, just as in the case of any illness. Hospital management has made an increasing effort to collect for the State General Fund the amounts due. This effort is reflected in the following table of the past ten years' collections.

1944-45	.....	\$ 36,487.62
1945-46	.....	48,342.15
1946-47	.....	67,754.07
1947-48	.....	74,809.25
1948-49	.....	85,826.86
1949-50	.....	93,612.11
1950-51	.....	108,303.07
1951-52	.....	110,743.30
1952-53	.....	132,918.47
1953-54	.....	194,629.46

Non-Resident Patients Deported

With a mainenance cost of \$1073.10 per year per patient, it is economically wise to deport any patient who is a citizen of another state. By reciprocal arrangements with other states, the Arizona State Hospital made the following deportations during the year at a fraction of the cost of maintenance.

Arkansas	.....	2
California	.....	16
Colorado	.....	1
Illinois	.....	7
Kansas	.....	1
Kentucky	.....	1
Massachusetts	.....	2
Minnesota	.....	4
Missouri	.....	4
Mississippi	.....	1
Nebraska	.....	1
New Jersey	.....	1
New Mexico	.....	3
New York	.....	2
Ohio	.....	3
Oregon	.....	1
Tennessee	.....	5
Texas	.....	1
West Virginia	.....	1
Total	.....	57



<b>Mattresses Manufactured:</b>	
Cotton .....	1,048
Cotton Roll Edge .....	76
"Indestructible" .....	519
Naugahyde (Plastic Covered) .....	61
Special .....	6
	<hr/>
	1,710
Pillows Made .....	168
Bench Cushions Made .....	18
Box Springs Made .....	6
Beds and Cots Repaired .....	113

Mattress Factory patients are shown learning a useful trade while supplying the hospital's constant need for mattresses.



## Mattress Factory Production Report

During the fiscal year 1953-54, the Arizona State Hospital Mattress Factory altered its mattress design, doing away with the ancient practice of supplying moss-filled pads for the patients' beds, and beginning the manufacture of standard design cotton-filled mattresses. The Hospital also instituted the practice of manufact-

uring mattress of a relatively indestructible design, covering some with very strong plastic materials that are impervious to moisture and very resistive to destruction. While the unit cost of mattresses rose very noticeably, it was only necessary to manufacture 1,710 mattresses; whereas, the previous fiscal year's mattress re-

quirements were a total of 3,397! This new design not only served the purpose of making a much more comfortable mattress, but by the durability of the new design, it effected a saving in manufacturing time and a very appreciable savings in the total cost for the number of mattresses manufactured.





Headquarters for Engineering Services. This building houses the tools, machines and repair parts used by plumbers, electricians, steamfitters, carpenters, cabinetmakers, welders, auto-mechanics, painters, refrigeration mechanics and general repairmen.

## Report of the Engineering Services Department

During the fiscal year the Engineering Services Department accomplished 10,730 emergency service calls for repair or maintenance of buildings, furnishings, equipment and grounds. Emergency service is defined as being that which is immediately concerned with the health, safety and security of patients, employees and the Hospital and Farm facilities. It is considered to be routine maintenance and repairs to restore to a condition of original function before ultimate failure or loss of designed function occurs.

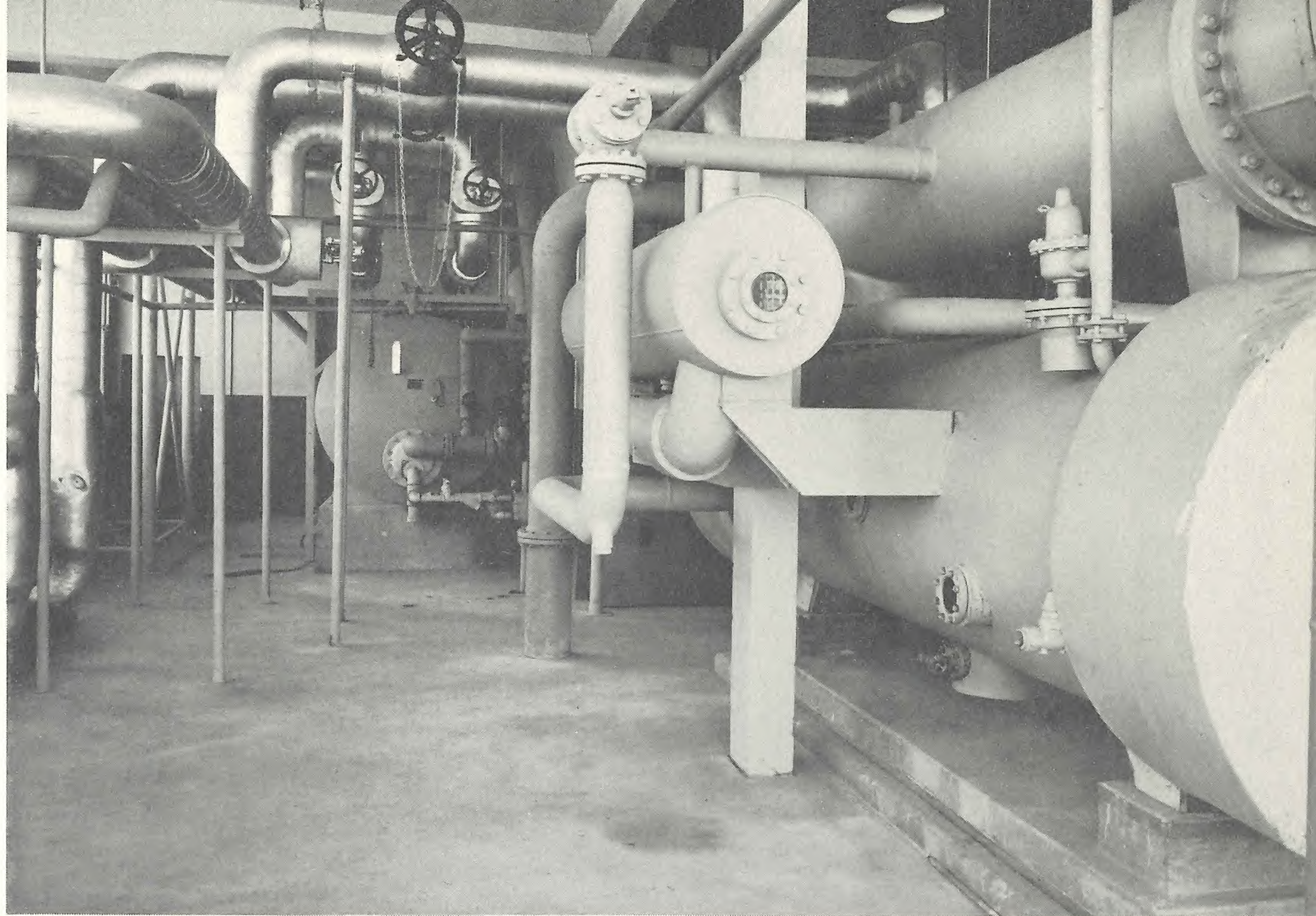
During the year we completed 276 engineering service requests (other than emergency service) for remodeling, rehabilitations, extensive repairs, fabrication and installations.

A "preventive maintenance" program with equipment records has been instituted to increase the physical life and economical operation of equipment.

This modern technique calls for records that are constantly revised along with exacting, periodic inspections. The end result will be a minimum of equipment failure and buildings that are maintained in a respectable state of repair.

The annual fire inspection of our facilities by the Fire Prevention Bureau of the City of Phoenix Fire Department is very favorable and we were commended for our "wholehearted cooperation".





A portion of the hospital's central system for supplying domestic hot and cold water, heating and refrigeration.



Through these tunnels hospital buildings are supplied with heating, cooling, domestic water and telephone service.







